NO. OF COPIES RECEIVED				•	Form C-1		
DISTRIBUTION					Supersede C-102 and		
SANTA FE		NEW MEX	ICO OIL CON	SERVATION COMMISSION	Effective		
FILE				_			
U.S.G.S.	s.g.s. Jul 2 12 14 159					5a. Indicate Type of Lease	
LAND OFFICE					State Fee X		
OPERATOR					5. State Oil 8	Gas Lease No.	
OFERATOR							
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)							
1.	32 377210311				7, Unit Agree	ment Name	
	ELL .	OTHER-					
2. Name of Operator						8, Farm or Lease Name	
K. K. Amini						Will	
3. Address of Operator						9. Well No.	
400 Wall Towers West - Midland, Texas 79701						#1	
4. Location of Well						10. Field and Pool, or Wildcat	
UNIT LETTER M 554 FEET FROM THE SOUTH LINE AND 554 FEET FROM						Undesignated	
UNIT LETTER IVI , 334 FEET FROM THE BOULT LINE AND 334 FEET FROM							
Most		26	9-8	RANGE 34-E			
THE VVESL	_ LINE, SECTIO	N TOW	(NSHIP	RANGE	- HMPM.		
mmmm	mm	TTT 15 Flevation	on (Show whether	DF. RT. GR. etc.)	12. County	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
15. Elevation (Show whether DF, RT, GR, etc.)							
Not Available							
10.	Check A	Appropriate Box T	o Indicate 1	Nature of Notice, Report	or Other Data		
NOT	TICE OF IN	TENTION TO:		SUBSEC	QUENT REPORT)F:	
PERFORM REMEDIAL WORK		PLUG A	ND ABANDON	REMEDIAL WORK	AL	TERING CASING	
TEMPORARILY ABANDON				COMMENCE DRILLING OPNS.	X PL	UG AND ABANDONMENT	
PULL OR ALTER CASING		CHANGE	PLANS	CASING TEST AND CEMENT JOB	7		
				OTHER			
OTHER							
17. Describe Proposed or	Completed Op-	erations (Clearly state	all pertinent des	ails, and give pertinent dates, in	scluding estimated date	of starting any proposed	
work) SEE RULE 110	3.						
		1 11 . 0 0	0 0 16				
6-9-69	Spudde	d well at 2:0	0 P.M.				
7-5-69 Drilled 16" hole 150'							
7-7-69	3A/~11 T	iomnomomile. Ah	2 2022	Domminaion monuo eta	d to	גיח וו.	
7-7-09	well i	emporarry Ap	andon &	Permission requeste	ed to carry we	;11 1.A.	
				•			
18. I hereby certify that th	e information	above is true and comp	lete to the hest	of my knowledge and belief.			
				,			
$\psi = 0$	6/11/	· /	4	1 1/2 1/4		117110	
SIGNED KE YELL	10/_1	MISEL	. TITLE 1	xatagent	DATE	1/169	
	1	7					
$\backslash \ / \ \rangle$	$\sim 10^{-1}$ M	7	اجملد	والمستحدد المناسم المستحدد المستحدد والمستحدد	• .	· · · · · · · · · · · · · · · · · · ·	
APPROVED BY	XVX	any		MERVISOR DUTIEST !	DATE	- 4 1	
CONDITIONS OF APPROV	VAL, IF ANY:						
	_,	V					
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