Form 9-331 (May 1993) UNULD STA DEPARTMENT OF TH GEOLOGICAL S	E INTERIOR (Other instructions of the	NM 073791
SUNDRY NOTICES AND R (Do not use this form for proposals to drill or to d Use "APPLICATION FOR PERMIT	EPORTS ON WELLS (eepen or plug back to a different reservoir. T for such proposals.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1.		7. UNIT AGREEMENT NAME
OIL CAS OTHER		8. FARM OR LEASE NAME
2. NAME OF OPERATOR Coquina Oil Corporation		Federal 3
3. ADDRESS OF OPERATOR		9. WELL NO.
200 Bldg. of Southwest, Midland, Texas 79701 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* New also space 17 below.) At surface 1980' FWL & 660' FNL of Section 3.		10. FIELD AND FOOL, OR WILDCAT Vada Penn 11. SEC., T., R., M., OR BLK. AND SERVEY OR AREA
		Sec. 3, T9S, R35E
	Show whether DF, RT, GR, etc.)	12. COUNTY OF PARISH 13. STATE
14. FERGUE SOL	173', K.B. 4184'	Lea N. M.
		Other Data
	Io Indicate Nature of Notice, Report, or	QUENT REPORT OF:
NOTICE OF INTENTION TO: TEST WATER SHUT-OFF PULL OR ALTER CAS' FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACUDIZE MEANDON* REPAIR VELL CHANGE PLANS	ING WATER SHCT-OFF FRACTURE TREATMENT X SHOOTING OR ACIDIZING (Other) (Norre: Report result	REPAIRING WELL ALTERING CASING ABANDONMENT* ts of multiple completion on Well pletion Report and Log form.)
and 9746+'. 3. Run Free Point, cut off	roduce oil in commercial quan in the following manner: 9700'. Collars at 9613', 96 and lay down 5 1/2" casing.	tities and it is our intent
4. Run Free Point, cut off 5. Go in hole with tubing f Plug No. Ft. Sx. 1 75 10 2 100 30 3 100 30 4 100 30 5 100 35 6 100 75 7 10	and lay down 8 5/8" casing. to spot following plugs: <u>From/To</u> 9700 - 9625 on top of C.I Top of 5 1/2" stub 5400 - 5300' 4100 - 4000' across intern Top of 8 5/8" stub 425 - 325' At surface	1
Load hole with mud be	etween plugs.	
Verbal approval received from Mr. 18. I hereby certify that the forgoing is true and correct		w Mexico, on 11-2-73.
SIGNED - Freiry	TITLE Superintendent	
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	BI. ON

*See Instructions on Reverse Side