Form 9-331 (May 1963)	U . ED STATES DEPARTMENT OF THE INTERI	OR SUBMIT IN TRL. ATE* (Other instructions on reverse side)	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.
	GEOLOGICAL SURVEY		NM 0127905
(Do not use t	JNDRY NOTICES AND REPORTS ( this form for proposals to drill or to deepen or plug b Use "APPLICATION FOR PERMIT—" for such pr	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
OIL GAS WELL WELL	7. UNIT AGREEMENT NAME		
2. NAME OF OPERATO	8. FARM OR LEASE NAME		
3. ADDRESS OF OPERA	ATOR Oil Company		Morton Federal
4. LOCATION OF WELL	(Report location clearly and in accordance with any	7 State requirements *	2
At surface	below.)	State requirements.	Bough - Limo Penn
1980'F	NL +1980'FWL	المنتوعة المنتوعة	11. SEC., T., R., M., OR BLK. AND SUBVEY OR AREA  Lec. 12 7-9-5 R-35-E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
10	4/40 G R	.	Lea Kuy Mufico
16.	Check Appropriate Box To Indicate N	ature of Notice, Report, or Ot	her Data
	NOTICE OF INTENTION TO:	SUBSEQUE	NT REPORT OF:
TEST WATER SHU	T-OFF PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE		SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL (Other)	CHANGE PLANS	(Other) 3 2 CAO (NOTE: Report results o	f multiple completion on Well
17. DESCRIBE PROPOSEI proposed work.	OR COMPLETED OPERATIONS (Clearly state all pertinent  If well is directionally drilled, give subsurface locations.) *	Completion or Recomplet	ion Report and Log form.)
nent to this worl	s.) *	one and measured and true vertical	depths for an markers and zones perti-
2-8-69			(원) 소흥통환 (최 네일요요) 현기
Dulho	078" how to 9915.	•	
	10 JtD 5 2" 17 # N-80		
Contol.	W/130 SX 50-50 7	Dog- Incovin	if W/470 gel
47 FS	alt per st unent	followed!	W/75 st
Class"	"c" Latex. They of	our @ 4:30	P.M. Japy
Kennent	by temp survey)	2, 8660. Press	) tested Cag.
to 210	of PSI fer 30 min	ted of the WO	C & terd.
The Lot	O. K Miling temp.	10 Hamatia	Nemp 14
Caterin	atiol congesizion &	erughies!	700 PSI

18. I hereby certify that the foregoing is true and corres	·	nochetical Check DATE Dean feed 19 19
(This space for Federal or State office use)  APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		

\*See Instructions on Reverse Side