UNIT STATES SUBMIT IN TRIPLICA May 1963) DEPARTMENT of THE INTERIOR verse side) GEOLOGICAL SURVEY				Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. NM 0557836 6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
SUNDRY (Do not use this form J	NOTICES AND REPO	ORTS ON a or plug back for such propo	to a different reservoir. sals.)	6. IF INDIAN, A	LOTTEE OR TRIBE NAME	
1.				7. UNIT AGREEM	7. UNIT AGREEMENT NAME	
OIL GAS WELL WELL OTHER Dry Hole				8. FARM OR LEA	8. FARM OR LEASE NAME	
2. NAME OF OPERATOR Apexco, Inc.				Burke Federal Comm.		
3. ADDRESS OF OPERATOR				9. WELL NO.		
1121 First Place, Tulsa, Oklahoma 74103 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.•				10. FIELD AND	10. FIELD AND POOL, OR WILDCAT	
See also space 17 below.) At surface 660' FSL and 2008' FEL or the approximate Center of Unit Letter O, Sec. 1-95-33E				Vada 11. SEC., T., R., M., OR ELK. AND SURVEY OR AREA		
					-33E	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, CR, etc.)				PARISH 13. STATE	
	4325.8 Gro			Iea	l New Mexic	
	heck Appropriate Box To I	ndicate Nat		Y OINER Data SEQUENT REPORT OF:		
NOTICE	OF INTENTION TO:			· ·	AIRING WELL	
TEST WATER SHUT-OFF	PULL OR ALTER CASING		WATER SHUT-OFF FRACTURE TREATMENT		ERING CASING	
FRACTURE TREAT	MULTIPLE COMPLETE ABANDON*		SHOOTING OR ACIDIZING	АВА	NDONMENT*	
REPAIR WELL	EPAIR WELL CHANGE PLANS (Other)			uits of multiple completion on Well		
(Other) Set Casing (Other) Set Casing 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent da proposed work. If well is directionally drilled, give subsurface locations and measured and true very				impletion Report and	Log torm.)	
B-5 Drlg. 3010' B-6 Drlg. 3582' B-7 Drlg. 3875' B-8 Drld. 11%" http://doi.org/10.11%	Redbed & Salt Salt & Anhydrite Anhydrite & Gypsum Anhydrite & Lime ole to 3930' & ran 3	3940' of	8 5/8" 28# & 24#,	K-55, New 8	Used casing,	
Set @ 3930'	& cemented w/500 sks	s, Class	C. Plug down G	10.42 b.m.	J-7-74.	
					•	
					·	
18. I hereby certify that the SIGNED	foregoing is true and correct	ritle Regi	onal Production	Managerbare.	4-19-74	
(This space for Federal of				NR RECUKU		
APPROVED BY CONDITIONS OF APPR(r	TITLE	ACCEPTED F	1974 PT		
	*See	Instructions	on Reverse B ids. GEOLC HOBBS,	DGICAL DEXICO	1	