		n is an ouno Constructiviti	
Form 9-331 (May 1963) DEPART	UN ED STATES MENT OF THE INTE	P. C. SUBMIT IN TRIL ATE. (Other Instruction, 91 - 17 HOR, TRISSIDAME //ICO 88240	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.
GEOLOGICAL SURVEY			NM-058677
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_" for such proposals.)			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
			7. UNIT AGREEMENT NAME
OIL GAS GAS OTHER			· · · · · · · · · · · · · · · · · · ·
2. NAME OF OPERATOR			8. FARM OR LEASE NAME
Petroleum Corporation of Texas 3. ADDRESS OF OPERATOR			Bate Federal
P.O. Box 911, Breckenridge, Texas 76024			9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			10. FIELD AND POOL, OR WILDCAT
See also space 17 below.) At surface			Prairie/Cisco S
Unit Letter F, 1980' FNL, 1980' FWL, Section 22, T-8-S,			11. SEC., T., R., M., OR BLK. AND SURVEY OR ABEA
R-36-E			· 문양의명 : 국 원음실한
			Sec. 22, T-8-S, R-36-E
14. PERMIT NO.	15. ELEVATIONS (Show whethe	er DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
		······	Roosevelt New Mexic
16. Check A	ppropriate Box To Indicat	e Nature of Notice, Report, or C)ther Data
NOTICE OF INTE	NTION TO:	SUBSEQU	JENT REPORT OF :
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT
REPAIR WELL	CHANGE PLANS	(Other) <u>Temp. Abar</u>	of multiple completion on Well
(Other)		Completion or Recompl	letion Report and Log form.) including estimated date of starting any
well for a SWD #ell are the same base le The condition of thi	for our Bate "A" Fe ease . Ls well is such that	t it will not allow dama s or water, or leakage of DECENT	age to the producing of any substance at
18. I hereby certify that the foregoing SIGNED	· // //	U.S. GEOLOGICAL SU NOSWELL, NEW ME	xico
(This space for Federal or State of	dice ùse	· · · · · · · · · · · · · · · · · · ·	
(Orig. Sgd.) PET	ER W. CHESTER TITLE	_	DATE
CONDITIONS OF APPROVAL, IF		OVED FOR MONTH PERI	
	2 7 1962 ENDI	NG <u>MAY 27 1983</u>	
RO:	*See Instruct	tions on Reverse Side	and a second second Second second
JAAGD J	AL GILLRAAN "See Instruct SUZERVISO (

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O.C.O. HOBES CITIES

MAY 28 1982