					Form approved. Budget Burean No. 42-R1424. EASE DESIGNATION AND SERIAL NO.	
				6. IF INDIAN, A	ULOTTER OR TRIER NAME	
OIL CAB WELL OTHER 2. NAME OF OPPERATOR 8. F Felront Oil Corporation F				-		
				7. UNIT AGREE	MENT NAME	
					FARM OR LEASE NAME	
				9. WELL NO.	10	
c/o Cil Reports	& Gas Services, Boy	763 Ho	bbs.New Mexico	1		
See also space 17 below.)				· · · · · · ·	POOL, OR WILDCAT	
1650 ' FSI	2 & 1650' FEL of Sect	ion 10		11. SEC., T., B.,	San Andres Asso M., OB BLK. AND OB ABEA	
14	15. BLEVATIONS (Show	-1-41		Sec. 10	T85 R37E	
			ι, um, είζ.)		PARISH 13. STATE	
i6. (Lineck Appropriate Box To I			Roosevel	LL LI NAMA	
	E OF INTENTION TO:	aicate 14a		SEQUENT REPORT OF		
					·	
TEST WATER SHUT-OFF	MULTIPLE COMPLETE		WATER SHUT-OFF Fracture treatment		AIRING WELL	
SHOUT OR ACIDIZE	ABANDON*	X	SHOOTING OR ACIDIZING		NDONMENT*	
REPAIR WELL	CHANGE PLANS		(Other)			
(Other)	(Norz: Report results of m Completion or Recompletion				ipletion on Well	
 3774, 100 for 100 foot plug 100 foot plug 10 sacks at su Mud between al 	1/2" casing, if below bot plug across top if across 4 1/2" casing across 8 5/8" casing urface with regulation if plugs. I plugs.	San Andro g stub g shoe @ on marke:	e s 357	(1) A state of the state of	(1) A set of the se	
18. I hereby certify that the SIGNED ADDA (This space for Federal of APPBOVED BY	r State office use)	ITLE ITLE	Agent APP RO	DATE	6/9/70	
CONDITIONS OF APPRO			JUN 1	1970	1 . <u>.</u> .9	

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والمستحدث الألفان

A MARK TOLLARS

RECEIVED

JUN 1 5 1970

OIL COMSERVATION C. M. HOBBS, N. M.