m 9-331 .ay 1963)	DEPAR	UNI') STAT TMENT OF THE		SUBA	DPY TO C		Form approv Budget Bure	au No. 42-R1424	
		GEOLOGICAL SU					NM-01334-B 6. IF INDIAN, ALLOTTE	E OR TRIBE NAME	
(Do not		DTICES AND RE posals to drill or to deep ICATION FOR PERMIT-							
	GAS Y						7. UNIT AGREEMENT NA	AME	
2. NAME OF OPE	WELL X OTHER BATOR						8. FARM OR LEASE NAM	ME	
Holly	Energy Inc.		Texaco Federal						
3. ADDRESS OF		ania New Maria		<u>^</u>			9. WELL NO.		
		esia, New Mexic			ements •		10. FIELD AND POOL, OR WILDCAT		
See also spac	e 17 below.)		-				Todd-San Andres		
660 ' Roose	FSL and 660'		11. SEC., T., B., M., OB BLK. AND SUBVEY OR AREA 7						
							Sec 27, T-1/7-	S, R-35-E	
14 PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4204 GL				12. COUNTY OR PARISE			
· · · · · · · · · ·							Roosevelt	N.M.	
16.	Check /	Appropriate Box To	Indicate N	lature of h	Notice, Report	, or O	ther Data		
	NOTICE OF INT	CENTION TO:			s	UBSEQUI	ENT REPORT OF:		
TEST WATER	SHUT-OFF	PULL OR ALTER CASING		WAT	ER SHUT-OFF		REPAIRING	WELL	
FRACTURE T		MULTIPLE COMPLETE			TURE TREATMENT		ALTERING C		
SHOOT OR A	·	ABANDON [®] Change plans		(Oth	OTING OR ACIDIZI: Ier)	NG	ABANDONME	NT"	
(O(her))					(NOTE: Report	results tecomple	of multiple completion tion Report and Log fo	on Well	
17 to scatbe pro	work. If well is dire	DPERATIONS (Clearly state ctionally drilled, give sul	e all pertinent bsurface locat	t details, ar tions and me	d give pertinent	dates.	including estimated dat	te of starting an	
]	Perforated we shot per foc Pebruary 2, 19	ll thru 2" tubi ot (8 holes). 979.	.ng from Swabbed	4167' well a	- 4169' an nd put on	ıd 41' produ	74' - 4178' wi action	th	
							а (5 Е) V AUG 1 5 19 , s. geological Hobbs, new м	79 . survey	
18. I hereby cer	tify that the foregoin	g is true and correct					renRD		

I hereby certify that the foregoing is true and correct.			0000		
SIGNED Ritart Tout	TITLE Field	Superviser	ENR RECUNU	August 1	3, 1979
		F antOILU	10	<u> </u>	
(This space for Federal or State office use)			15 1979	7	
APPROVED BY	TITLE		1 _ CIANE	L	
CONDITIONS OF APPROVAL, IF ANY:		AU GEC	DLOGICAL SUMAN -	7	
		J. JOBB	5.1.		
*Se	e Instructions on	Reverse Side			

BUT CHECHE ALMANY TO BE AND A STREET

RECE. C.D. HORE DE

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