				<i>&gt;</i>	7	J. 70 0, 0.0.	
Form 9-331 (May 1963)	DEPART	UNITED STAT	ES Uniterior	SUEMIT IN TRIPLICA! (Other instructions on	TE*	Form approved.  Budget Bureau No. 42-R142  5. LEASE DESIGNATION AND SERIAL NO.	
		EOLOGICAL S		verse side)		NM OLO8997-A	
	UNDRY NOT		POR SUCH Propose	WELLS o a different reservoir.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
OIL X GAS	LL OTHER			JUI 1	(e.	7. DNIT AGREEMENT NAME	
2. NAME OF OPERATO	OUNTY LAN	d Co.		Kon Maria	5	FEDERAL 23	
3. ADDRESS OF OPER.	r STATE B	ANK BIL	Midwad	GEXAS MELLO	· ] }	9. WELL NO.	
4. LOCATION OF WELL See also space 17 At surface	L (Report location cl	early and in accordan	ace with any State	requirements.*		CHAVE 200- SAJ Andres	
660 FNL	: 660' FEL		UNIT A	NE/1 NE/4		11. SEC., T., E., M., OF BLK. AND SURVEY OF AREA  23 T7S R334 NMF/	
14. PERMIT NO.		15. BLEVATIONS (Sho	··· ·······	R, etc.)		ROOSEVELT N. VI.	
16.	Check Ap	propriate Box To	Indicate Natur	e of Notice, Report, o	or O	ther Data	
NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHI FRACTURE TREAT SHOOT OR ACIDIZ REPAIR WELL (Other)	E 2	ULL OR ALTER CASING ULTIPLE COMPLETE BANDON* HANGE PLANS	X	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (Note: Report rest	ults comple	ALTERING CASING ABANDONMENT*  of multiple completion on Well tion Report and Log form.)	
17. DESCRIBE PROPOSE proposed work, nent to this wor	. If well is direction rk.) *	ally drilled, give sul	bsurface locations :	alls, and give pertinent da and measured and true ver SURPACE	rtical	including estimated date of starting an depths for all markers and zones pert	

DRILL 824" HOLE TO 1850'T. CEMENT TO SURFACE W/3005X Incor CEMENT + 8% GEL. TAIL IN W/1005X NEAT TREATED WITH 2% CACIZ. TEST CASING TO 1000FSI

Develo "la" Hole to 4400' TD. Run Logs. Coment 41/2" Casing AT 4400' + W/ 180 SX Incor Plus 8% GEL SATURATED SALT CEMENT. TAIL IN W/ 100 SX Incor SATURATED COMENT.

PERFORATE & STIMULATE FOR COMMERCIAL PRODUCTION.

18. I hereby certify that the foregoing is true and correct SIGNED WOLLE KAMERED	TITLE DISTANT ACCULATION	T DATE 6-20-66
(This space for Federal or State office use)		
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		- SIVED

\*See Instructions on Reverse Side

