Form 9-331 (May 1963)

UN, LD STATES P. O. BOX 1898OIN TRIPL. EN DEPARTMENT OF THE INTERRES. MEMORIAL MEXICO 88240

		Form Budge				Nο.	42-R	1424	
i,	LEASE	DESIG	NAT	ЮN	AN	o si	ERIAL	NO.	

GEOLOGICAL SURVEY	NM-042253			
SUNDRY NOTICES AND REPORTS  (Do not use this form for proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such 1	6. IF INDIAN, ALLOTTEE	OR TRIBE NAME		
I.  OHL X GAS WELL X WELL OTHER	7. UNIT AGREEMENT NA	ME		
2. NAME OF OPERATOR		8. FARM OR LEASE NAM	E	
DALPORT OIL CORPORATION  3. ADDRESS OF OPERATOR	FEDERAL #22 9. WELL NO.			
3471 InterFirst One, Dallas, Texas 752	202	#1		
4. LOCATION OF WELL (Report location clearly and in accordance with any See also space 17 below.)	State requirements.*	10, FIELD AND POOL, OR WHIDCAT		
See also space 17 delow.) At surface		Chaveroo		
SE SE Section #22	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA			
		22-7S-33E		
14. PERMIT NO. 15. ELEVATIONS (Show whether D	F, RT, GR. etc.)	12. COUNTY OR PARISH	13. STATE	
		Roosevelt	NM	
16. Check Appropriate Box To Indicate 1	Nature of Notice, Report, or C	Other Data		
NOTICE OF INTENTION TO:	SUBSEQU	SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING W	ELI	
FRACTURE TREAT MULTIPLE COMPLETE	FRACTURE THEATMENT	ALTERING CA	SING	
SHOOT OR ACIDIZE ABANDON*	SHOOTING OR ACIDIZING	ARANDONMEN	T*	
REPAIR WELL CHANGE PLANS	(Other)			
(Other) Permission to Vent Gas		ults of multiple completion on Well ompletion Report and Log form.)		
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertine proposed work. If well is directionally drilled, give subsurface local near to this work.) *	at details, and give pertinent dates, ations and measured and true vertical	including estimated date il depths for all markers	of starting any and zones porti	

Permission is requested to vent gas. Volume is not

large enough to measure and be commercial.



S. I hereby certify that the foregoing is true and	overact.	
SIGNED W. SIGNED	TITLE President	DATE 12/16/85
APPROVED BY PETER W. CHESTER	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY: DEC 2 3 1985		
	ENT*See Instructions on Reverse Side	

PROMITE

DEC 83 1835

· Personal Control