

## N. M. OIL CONS. COMMISSION

P. O. BOX 1930

Form 9-331  
(May 1963)

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-4039-E

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Will 693 Ltd.

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Vada Penn

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 34, T-8-S, R-35-E

12. COUNTY OR PARISH 13. STATE

Roosevelt

N.M.

## 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.)1. OIL ☒ GAS ☐  
WELL WELL OTHER

2. NAME OF OPERATOR

Petroleum Production Management, Inc.

3. ADDRESS OF OPERATOR

Suite 200/Sutton Place Bldg. Wichita, Kansas 67202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1830' FSL and 1900' FFL Sec. 34, T-8-S, R-35-E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

Stake new location

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any  
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-  
nent to this work.)\*Please be advised that John West Engineering will stake the above described  
location on Wednesday morning, October 4, 1989.

Thursday

18. I hereby certify that the foregoing is true and correct

SIGNED

Wm. Grossbeck

TITLE District Engineer

DATE 9-29-89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

RECEIVED

DEC 7 1989

OCD  
HONORS OFFICE