Form 9-33; (May 1963)	UI ED ST DEPARTMENT OF T GEOLOGICAL	HE INTERIO	SUBMIT IN TRIPLIC (Other instructions on verse side)	5. LEASE DESIGNATIO NM 027395	eau No. 42-R1424. N AND SERIAL NO.	
(Do not use	UNDRY NOTICES AND this form for proposals to drill or to Use "APPLICATION FOR PERM	REPORTS ON deepen or plug bac MIT—" for such prop	N WELLS k to a different reservoir. posals.)	6. IF INDIAN, ALLOTT		
				7. UNIT AGREEMENT	7. UNIT AGREEMENT NAME	
NAME OF OPERATOR				8. FARM OR LEASE NAME PUDCO FECERAI		
Pennzoil United, Inc.				9. WELL NO.		
P. O. Drawar 1828 - Midland, Texas 79701				1=	1 🛫	
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)				10. FIELD AND POOL, Undesigna		
At surface No. 1 810' FSL & 1980 FEL of Sec. 33, T-8-S, R-31-E				11. SEC., T., B., M., O	11. SEC., T., R., M., OR BLK. AND	
			1-Secords, ortags-S, R-31-E			
		(Show whether DF, R		12. COUNTY OF PARI	SH  13. STATE	
4. PERMIT NO.	15. ELEVATIONS	(Show whether br, k	(), un, euc.)	Chaves	16 - 1	
	Charle A anomista Box	To Indicate Na	ture of Notice Report or (	Other Data		
	Check Appropriate Box To Indicate Nature of Notice, Report, or C			UENT REPORT OF:		
TEST WATER SI	<b></b>		WATER SHUT-OFF	REPAIRIN	3 WELL	
TEST WATER SI			FRACTURE TREATMENT	ALTERING	CASING	
SHOOT OR ACID			SHOOTING OR ACIDIZING	ease designati	GA X	
REPAIR WELL	CHANGE PLANS		(Other)	ts of multiple completion		
(Other)	TED OR COMPLETED OPERATIONS (Clearly k. If well is directionally drilled, giv		Completion or Recom	pietion Report and Log	тогш.)	
nent to this w	1 was drilled as Pubco Ctober 15, 1968.					
20.2	2 is now drilling on p					
We propo Pubco Fe	ed to change the entir leral.	e lease des				
			RECEI			
			APD o			
			APR 2 4	1969 /	1222 pag	
				• 4. S.	, , , , , , , , , , , , , , , , , , ,	
			ARTEBIA, DF	×. Fi⊡er		
	<u></u>					
18. I hereby certify	that the foregoing is true and correct		·illing Superintendo	ont	4-22-09	
(This space for	Federal or State office use)					
APPROVED BY CONDITIONS	DE ARD HOVAL, IF ANY	TITLE		DATE		
CEPTED FOR M	that the foregoing is true and correct Federal or State office usen in DSES ONE MARTHOVAL, IF ANY CARDROVAL, IF ANY CINI District Engineer	See Instructions	on Reverse Side			
and a state						