Form 9-331			ъΟ	OIL CONS. BOX 1980			Form Ap		
· 137.	UNITED	STATES	HOB	BS, NEW M	EXICO	88240	Budget	Bureau No. 42-	-R14;
	DEPARTMENT OF				5.	LEASE		•	
							113999A		<u> </u>
	GEOLOGICA	L SURVEY		·	6.	IF INDIAN, A	LLOTTEE O	R TRIBE NAM	٧E
	NOTICES AND rm for proposals to dril 9-331C for such prop					UNIT AGREE	MENT NAM	E	-
				م من الما الم الم الم الم الم الم الم الم ال	8.	FARM OR LE			
1. oil well 🖾	gas well other						lips Fe	deral	
2. NAME OF					9.	WELL NO.	. ".		
El Ran							#3		
3. ADDRESS C					_ 10.	FIELD OR WI			1.
	x 911, Lubbocl	ረ ጥ	408					in an	
	OF WELL (REPORT L				11.	SEC., T., R., AREA	M., OR BLM	. AND SURV	EY C
below.)		V	LCARLY.	See space 1		tion 13,	T85 D3	2F	
	E: Unit Letter		FSL	& 2280' F		COUNTY OR			
AT TOP PR	OD. INTERVAL: S	ame				Chaves	inden 1	N.M.	
AT TOTAL D					14.	API NO.			
	ROPRIATE BOX TO	INDICATE	NATURE	OF NOTICE	.,			1997 - 19	
	R OTHER DATA				·	ELEVATIONS	SHOW D		
BEQUEST FOR		0				4440	' G.L.	, RUD, ANI	(۷۷ ت
REQUEST FOR	_	SUBSEQU	ENT RI	EPORT OF:	-				
FRACTURE TRE		Ļ	4						
SHOOT OR ACI	=	L r	f						
REPAIR WELL		Ī	Ť		(NC	TE: Banant man			
PULL OR ALTER		Ī	Ĩ			TE: Report res change on	Form 9-330) e completion	or zo:
MULTIPLE COM]						
CHANGE ZONES ABANDON*		Ĺ	2						
(other)		Ø	<u>s</u>				+ t.		
·			_						
measured a	PROPOSED OR COM timated date of start and true vertical depth	is for all mar	kers and	l zones pertin	ent to th	nally drilled, is work.)*	ills, and giv give subsur	e pertinent face location	date ns ar
l. Set	CIBP at 4225'	and spo	t 35'	cement p	lug on	n top.			
2. Run	freepoint and	l cut cas	ing o	ff at 149	9' and	d pulled	4 1/2"	casing.	
3. Loa	d hole w/ mud.							· .	
4. Spo	t 30 sacks cen	nent at 4	1/2	stub at l	.499' 1	W.O.C. ta	ig plug	at 1343'	•
5. Loa	d hole w/ mud.					•			
6. Spo	t 15 sacks cen Comple				up P	.A. marke	er.		
		•	- / -	110		.:			
.									
Subsurface Safet	y Valve: Manu. and T	уре					Set @_		F
18. I hereby cert	ify that the foregoing	is true and c	orrect						
SIGNED	y Joing			ineering	Manage	GATE	6/19/92		
	/	(This spa	ice for Fe	deral or State o	ffice use)	<u> </u> -	AF	PROVEL	
APPROVED BY		TI	TLE	·			PETER	W. CHES)
CONDITIONS OF A	PPROVAL, IF ANY:	Approved : Liability up	is to plu	aning of the I is retained t Is completed,	WAR No.	r. T	JUN	2 4 1992)
		*See	Instruct	ions on Reverse	Side	R	OSWELL	ND MANAG	E

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