Form 9-331 (May 1963)			Z• Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.
		GEOLOGICAL SURVEY	
			NM 0228436-B 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	RY NOTICES AND REP		
(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.)			7. UNIT AGREEMENT NAME
OIL CAS WELL	OTHER		. UNIT AUBBALDIT NAME
2. NAME OF OPERATOR			8. FARM OB LEASE NAME
Olen F. Featherstone			Amerada Federal
3. ADDRESS OF OPERATOR			9. WELL NO.
239 Petroleum Building, Roswell, New Mexico 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			10. FIELD AND POOL, OR WILDCAT
See also space 17 below.) At surface			Undesignated
1980' FNL, 660' FEL Section 31, T. 14S, R. 35E			11. SEC., T., R., M., OB BLK. AND SUBVEY OR AREA
			$E_{2}^{1}NE_{4}^{1}$ Sec. 31
14. PERMIT NO.	15 ELEVATIONS (Show	v whether DF, RT, GR, etc.)	T. 14S, R. 35E, NMPM 12. COUNTY OF PARISH 13. STATE
	4045		Lea New Mex
<u> </u>	Charle Anneanciata Bay Tal	ndicate Nature of Notice, Report, c	- Other Data
NO	CHECK Appropriate box to t		SEQUENT REPORT OF:
TEST WATER SHUT-OFF FRACTURE TREAT	PULL OR ALTER CASING	WATER SHUT-OFF	A BEPAIRING WELL
SHOOT OR ACIDIZE	MULTIPLE COMPLETE ABANDON*	SHOOTING OR ACIDIZING	ALTERING CASING
REPAIR WELL	CHANGE PLANS	(Other)	
(Other)		(NOTE: Report res Completion or Reco	ults of multiple completion on Well ompletion Report and Log form.)
<ol> <li>DESCRIBE PROPOSED OR CO proposed work. If w nent to this work.)*</li> </ol>	)MPLETED OPERATIONS (Clearly state ell is directionally drilled, give subs	all pertinent details, and give pertinent da surface locations and measured and true ve	ates, including estimated date of starting any rtical depths for all markers and zones perti-
Oct. 4, 1967 Oct. 3, 1967	Cemented 310 sach Circulated out 23 1000# for 30 min TD 4500'. Ran 43 1165' 32# 2463' 24# 867' 32# Cemented with 400 sacks neat cement	J-55 Top J-55 Hiddle	ncore 2% CaCl <sub>2</sub> . and pressure tested ate casing as follows: 1, followed by 100 hours and pressure
SIGNED (UNENTE		TILE <u>General Manager</u>	DATE <u></u>
(This space for Federal or State office use)			
APPROVED BY TITLE TITLE			DATE
			APPROVED
*See Instructions on Reverse Side			이 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이
	Jee in	ISTOCHORS ON IVEVERSE SIDE	OCT 13 <b>1967</b>
		A	J L GORDON CTINS DISTRICT ENGINEER

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