Form 9-331 (May 1963)		UNITED STATE		SUBMIT IN TRIPLICAL & Other instructions on re-	Buuget Bi	ureau No. 42-R1424.
		MENT OF THE EOLOGICAL SUI		verse side)	5: LEASE DESIGNATI	ION AND SERIAL NO.
	6. TO INDIAN, ALLOTTEE OR TRIBE NAME					
SUN (Do not use this	DRY NOTI form for propos Use "APPLICA	CES AND REP als to drill or to deeper TION FOR PERMIT—"	ORTS ON n or plug back to for such propose	WELLS to a different reservoir.	6: REINDIAN, ALLO	TEE OR TRIBE NAME
1. OIL GAS	7. UNIT AGREEMENT	7. UNIT AGREEMENT NAME				
OIL GAS WELL WELL	None					
2. NAME OF OPERATOR	8. FARM OR LEASE	8. FARM OR LEASE NAME				
Kern Co. 3. ADDRESS OF OPERATOR	Federal 1()					
3005 N. Big S	1					
4. LOCATION OF WELL (R See also space 17 belo	10. FIELD AND POOL, OR WILDCAT					
At surface	N. Bagley Penn (Lover)					
1980' FNL & 1830' FWL Sec. 10,T-12-S,R-33-E					11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
					Sec. 10,T-	<b>2</b> -S,R-33-E
14. PERMIT NO.	ERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)			iR, etc.)	12. COUNTY OR PAR	ISH 13. STATE
	. <u></u>	4247 G.L.			Lea	N.M.
16.	Check Ap	propriate Box To Ir	ndicate Natur	e of Notice, Report, or C	Other Data	
NOTICE OF INTENTION TO:						
TEST WATER SHUT-O	r <b>e</b> P	ULL OR ALTER CASING		WATER SHUT-OFF	REPAIRIN	G WELL
FRACTURE TREAT		ULTIPLE COMPLETE		FRACTURE TREATMENT	ALTERING	G CASING
SHOOT OR ACIDIZE	X	BANDON*		SHOOTING OR ACIDIZING	ABANDON	MENT*
REPAIR WELL	c	HANGE PLANS		(Other)		
(Other)	(Other)  (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)					
17. DESCRIBE PROPOSED OF proposed work. If nent to this work.)	well is direction	NATIONS (Clearly state an ally drilled, give subst	all pertinent deta urface locations	ails, and give pertinent dates, and measured and true vertic	, including estimated al depths for all mari	date of starting any kers and zones perti-
1. Rig up pull	ing unit.	Install B.O.P	_			
				'.Place 20' sand	on b.n. w/dum	nn hailer.
3. Perforate t					011 b.p. w/ adi	ap buller.
4. Acidize 932						
5. Start well	pumping to	tanks to tes	t zone.			

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18. I hereby certify that the foregoing is true and correct	
SIGNED // Ulllu / Little Engineer	DATE 3/6/86
(This space cor Federal of Esatesofice use):	
APPROVED BY Area Manager TITLE	DATE 3-14.84

\*See Instructions on Reverse Side

MAR 17 1986
HOURS OFFICE