Form	9-331
(May	1963)

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May 1963)	DEDVE	$RTME_{i}$. OF THE_{i}			1 re-			ATION AND S	CDIAL NO
	DELVI			/[(verse side)					SERIAL NO.
		GEOLOGICAL S						L52 (b)	OIDE NAME
SU	INDRY N	OTICES AND RE	EPORTS O	N WELLS		· 11 1M	DIAN, AD		MIDE NAME
(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.)									
i.						7. UNIT AGREEMENT NAME			
OIL X GAS					l				
WELL OTHER NAME OF OPERATOR						8. FARM OR LEASE NAME			
Atlantic Richfield Company					1	Johns B DE			
ADDRESS OF OPERA		Company				9. WELL		DE	-
P. O. Box	1710. Hot	obs. New Mexico	88240				3	3 .	
P. O. Box 1710, Hobbs, New Mexico 88240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*						10. FIEL		OOL, OR WIL	DCAT
See also space 17 At surface	below.)					Mal	iamar	r Graybı	ıro
1980' FSL	& 1980' F	FWL (Unit Letter	r K)		ľ	11. SEC.	., T., R., M	I., OR BLK. A	
			,		. ,	18 ,1	URVEY OF	RAREA	
					1	24-	17s-3	32E	
PERMIT NO.		15. ELEVATIONS (Sh	now whether DF, P	RT, GR, etc.)		12. cou	NTY OR I	PARISH 13.	STATE
		4070	0' D F			Lea	L	N.	. М.
	Check	Appropriate Box To	Indicate Na	iture of Notice, Report	, or O	ther Da	ta		
		NTENTION TO:	1			ENT REPO			
TEST WATER SHU	T-OFF	PULL OR ALTER CASIN	tg	WATER SHUT-OFF			REPAI	RING WELL	
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT	,			RING CASING	
					(l .			
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZIN			ABAND	DONMENT*	
	,	ABANDON* CHANGE PLANS		SHOOTING OR ACIDIZING (Other) Shut in		mpora	abane ry Ab	pand.	x
SHOOT OR ACIDIZE REPAIR WELL (Other)	O OR COMPLETED	CHANGE PLANS	te all pertinent		results decomple	of multip	ry Ab	letion on W Log form.)	ell
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*See Instructions on Reverse Side

TITLE _

(This space for Federal or State office use)

ARPROVED