	7		•	
Form 9-331 (May 1963)	UNIT. > STATES	SUBMIT IN TRIPLIC (Other instructions on re	Form approved. Budget Bureau No. 42-R	1424
- •	DEPARTMENT OF THE INTERIOR	OR verse side)	5. LEASE DESIGNATION AND SERIAL	
	GEOLOGICAL SURVEY		40-05900	2/
St	INDRY NOTICES AND REPORTS C	ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE	NAME
	this form for proposals to drill or to deepen or plug be Use "APPLICATION FOR PERMIT—" for such pr			
1.	OSE ATTEMPTION FOR PRIMITE IN SUCH PR		7. UNIT AGREEMENT NAME	
OIL GAS WELL WEL	L OTHER WESTER Since	teen	MCA	
2. NAME OF OPERATO			8. FARM OR LEASE NAME	
Cante	mental oil con	MPONY	MCA Unit	-/:
3. ADDRESS OF OPERA	TOR 11 61 0 =	11,	9. WELL NO.	
DOX	(Report location clearly and in accordance with any	150-11CO	10	
See also space 17 At surface		state reguliements.	10. FIELD AND POOL, OR WILDON	4 40
nt surface		4	11, SEC., R., M., OR BLK. AND	
lolon' E	WL and 660'FWL o	U Can 37	SURVEY OR AREA	
000 77	VE SAME GOO FULL O		Sec.33 T-175.R	-3
14. PERMIT NO.	15. ELEVATIONS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE	•
	3927	'af	Sea 19.18	194
16.	Check Appropriate Box To Indicate N	ature of Notice, Report, or (Other Data	•
	NOTICE OF INTENTION TO:		UENT REPORT OF:	
TEST WATER SHU		WATER SHUT-OFF	REPAIRING WELL	1
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZI		SHOOTING OR ACIDIZING	BANDONMENT*	
REPAIR WELL	CHANGE PLANS	(Other)	ing lines &	•
(Other)			s of multiple completion on Well pletion Report and Log form.)	
	D OR COMPLETED OPERATIONS (Clearly state all pertinent If well is directionally drilled, give subsurface locati			
nent to this wor	k.) *		30111/ 31	2-
100.00	note wifeo	grovel 1	10-m 0141-08	
wer of		1 100	a tel wil son	CA
· 11L/1	act Casina at 3	815. Um	ence wy 300.	J 67
エケショ	non hale w/ pro- 9.5 # casing at 3	1 -4.	37110 11110	OY.
^ -	ement. Set po Completed -	reker at:	178 00/12/	7.
ess C C	emen.			
	a lated -	8-74-72		
ء د مسمک	Complete	0 01		
neco-	Ü			
	-			
)	·		
18. I hereby certify t	hat the foregoing is true and correct			
SIGNED KOT	rent trult in 1A	min. Superves	or DATE 9-8-7	2
		<u> </u>		
(This space for F	'ederal or State office use)	APPEDTE	D FOR RECORD	
APPROVED BY	TITLE	MUSEFIC	n i ail ME aain	
CONDITIONS OF	APPROVAL, IF ANY:	CET	1 1 1072	
		J SEF	P 1 1 1972	

*See Instructions on Reverse Side U. S. GEULOGICAL SURVEY
HOBBS, NEW MEXICO

CT 12772

OR CHARGE IN COMM.

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