Form 9-331		INITED CTIME					
(May 1963)	DFPART/	UNITED STATE OF THE	S Intediod	SUBMIT IN TRY (Other instruc	1 00 Fe.	Budget	pproved. Bureau No. 42–R1
		LOLOGICAL SUF		verse side)	,	5. LEASE DESIGN.	ATION AND SERIAL
S				14/EL 1 0		6. IF INDIAN, ALI	9405 (b
(Do not use	this form for propos	CES AND REPORTED TO THE PERMIT—"	OKIS ON a or plug back t	WELLS		, , , ,	SOLEE OR TRIBE NA
1.	Use "APPLICA	TION FOR PERMIT—"	for such proposa	uls.)	oir.		
OIL GA	S OTHER	11/0000 1	- 			7. UNIT AGREEME	NT NAME
2. NAME OF OPERAT		WHIER JA	VIECTIO.	N WELL		3. FARM OR LEAS	ICH
LONTINE	NIAL DI	ComPAN	' <i>y</i>		'	MIA	E NAME
ADDRESS OF OPER	RATOR	/	00.			WELL NO.	UN 1713!
LOCATION OF WEL	(Report location of	arly and in accordance	883	40		5	9
See also space 17 At surface	below.)	any and in accordance	with any State	requirements.*	1	O. FIELD AND PO	OL, OR WILDCAT
1001 -			· · · · · · · · · · · · · · · · · · ·		1	ALT. G.	SA KEPA
1980 FS	1 8 1980	FEL OF S	EL. 19			1. SEC., T., R., M. SURVEY OR	AREA
4. PERMIT NO.				TBA	5	419 T-1	75 R-32
		15. ELEVATIONS (Show	whether DF, RT, GF	3, etc.)	i	2. COUNTY OR PA	
		373	1 1) p			LEA	N.M
•	Check App	ropriate Box To Inc	dicate Nature	of Notice, Rep	ort, or Oth	er Data	•
	NOTICE OF INTENT	ON TO:				r report or:	
TEST WATER SHO	· · ·	LL OR ALTER CASING		WATER SHUT-OFF		REPAIRI	NG WELL
FRACTURE TREAT SHOOT OR ACIDIZ	_ "``	LTIPLE COMPLETE	_	FRACTURE TREATM	ENT	ALTERIN	G CASING
REPAIR WELL		ANDON*		SHOOTING OF ACID	IZING	ABANDO	NMENT*
(Other)		-	-	(Other) (NOTE: Repo	rt results of	multiple complet	lon on Wei
DESCRIBE PROPOSE	D OR COMPLETED OPERA	TIONS (Clearly state all lly drilled, give subsur	pertinent detai	Completion o	r recombiento	n Report and Los	g form)
nent to this wor	k.) *	TIONS (Clearly state all lly drilled, give subsur	face locations ar	nd measured and to	ue vertical d	epths for all man	rkers and zones per
Day	/	. 1. 01	/	, , ,	, ,	1 · 1 ·	1
CON CS	g. Inspection	" 109 . Cles	rued our	to 404	o . F.	lidized	OF
3670 - 38	100 W/1500	98/s 28% is	2610 .	et 41	2 7.	-# csq	. INEF
	•		0/ 1.	- 4	, ,	- , ,	1
3/90'- 3	573 W/	50 sks. l	lass C	Clinen	.t.	rested	INCr
						*	
1. 1000	# boll	ok. Cle	DNP / 1	out to	dud	DE PI	red bol
	. /:	Work st	6/0/	12/1/2		lale	1 12.18-
IN INJE	chili .	WORK ST	PITEU	12-9-1	4,00	מ שישים ונו	12 10
						÷*	
							-
							•
							
nereby certify the	at the foregoing is tru	e and correct		1			
SIGNED_	if ongo	TITLI	E JR. F	WHLYST		DATE 12	-30.74

SIGNED JAM ONGS TITLE SR. HINNLYST DATE 12-30.7

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

JAN 8 1975/ C>

USGS- F. MCA-3, File

*See Instructions on Reverse Side

JAN 8 1975 C. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO