Form	9-331
(Mav	1963)

Form approved.

SUNDRY NO (Do not use this form for pr Use "APPI OIL GAS WELL OTHE 2. NAME OF OPERATOR BOX 46C 4. LOCATION OF WELL (Report location of See also space 17 below.) At surface 1980 FUL ond 14. PERMIT NO. Check	tal oil Canada and the state of	ON WELLS back to a different reservoir proposals.) Ction ompony y State requirements.* - See 20 OF, RT, GR, etc.) 8714	7. UNIT AGREEMENT NAME OCH 8. FARM OR LEASE NAME MCH WELL NO. 10. FIELD AND POOL, OR WILDCAT MUL G-SA Reg 11. SEC., M., R., M., OR BLK. AND SURVEY OR AREA SEC 20 7-175 L- 12. COUNTY OR PARISH 13. STATE
(Do not use this form for pruse "APPI OIL GAS WELL OTHE 2. NAME OF OPERATOR CONTINUE 3. ADDRESS OF OPERATOR 4. LOCATION OF WELL (Report location of See also space 17 below.) At surface 14. PERMIT NO. 16. Check NOTICE OF I TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE	coposals to drill or to deepen or plug to LICATION FOR PERMIT—" for such plus to a control of the control of th	back to a different reservoir proposals.) Ction omforg y State requirements.* - See 20 or, RT, GR, etc.) 8 2 4	7. UNIT AGREEMENT NAME OF A WELL NO. 10. FIELD AND POOL, OR WILDCAT THE SEC. M., R., M., OR BLK. AND SURVEY OR AREA SEC 20 7-175 L- 12. COUNTY DE PARISH 13. STATE
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14. PERMIT NO. Check NOTICE OF I TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE	15. ELEVATIONS (Show whether Dispersions) Appropriate Box To Indicate Intention to:	L See 20 10F. RT. CR. etc.) 1821 df	10. FIELD AND FOOL, OR WILDCAT THE G-SA ROS 11. SEC., H., R., M., OR BLK. AND SURVEY OR AREA SEC 20 7-175 R- 12. COUNTY OR PARISH 13. STATE
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16. Check NOTICE OF I TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE	Appropriate Box To Indicate I	821 df	Lea N.M
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE	INTENTION TO:	Nature of Notice, Repo	or Other Data
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE	INTENTION TO:		my or other bank
FRACTURE TREAT SHOOT OR ACIDIZE			SUBSEQUENT REPORT OF:
SHOOT OR ACIDIZE	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL ALTERING CASING
	MULTIPLE COMPLETE ABANDON*	FRACTURE THEATME SHOOTING OR ACIDIZ	
	CHANGE PLANS	(Other)	rt results of multiple completion on Well
(Other)	(Cl. 1 - 1-4- 13 parting		
17. DESCRIBE PROPOSED OR COMPLETE proposed work. If well is dinent to this work.)	D OPERATIONS (Clearly state an pertine irectionally drilled, give subsurface loc	eations and measured and tr	ent dates, including estimated date of starting the vertical depths for all markers and zones. Iqueeza open h C coment.
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18. I hereby certify that the doleg	COLUMN TITLE	Edmin, Super	WIST DATE 4-28-
(This space for Federal or Ste	TITLE	 <u>U</u>	

*See Instructions on Reverse Side ICT ENG

USGS(S) MCA(3) File

RECEIVED

MAN - 9 1072

OIL CONSERVATION COMM.
HOBBS, N. M.