Revised	1-1-89

District Office		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240		
DISTRICT II P.O. Drawer DD, Arlesia, NM 88210	Santa Fe, New Mexico 87504-2088	30-025-32875
DISTRICT III		5. Indicate Type of Lease STATE FEE XX
1000 Rio Brazos Rd., Aztec, NM 87410		6. State Oil & Gas Lease No.
	CES AND REPORTS ON WELLS	
DIFFERENT RESER	POSALS TO DRILL OR TO DEEPEN OR PLUG BAC VOIR. USE "APPLICATION FOR PERMIT" 101) FOR SUCH PROPOSALS.)	/. Lease Name or Unit Agreement Name
I. Type of Well: Off. GAS WELL X WELL	OTHER	MARY 33
2. Name of Operator ANSON GAS CORPORATIO	N	8. Well No. #1
3. Address of Operator P 0 B0X 24060	OKLAHOMA CITY, OK 73124	9. Pool name or Wildcat STRAWN LIME/ATOKA
4. Well Location F 204	O NORTH Line and	2310 WEST
Section 33	Township 16S Range 38E	LEA
	10. Elevation (Show whether DF, RKB, RT, GR	NMPM County R. etc.)
	3710' GR	
NOTICE OF INT	Appropriate Box to Indicate Nature of No ENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL W	ORK ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE	DRILLING OPNS. DPLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TES	T AND CEMENT JOB $\overline{\mathbb{X}}$
OTHER:	OTHER:	
12. Describe Proposed or Completed Operation work) SEE RULE 1103.	one (Clearly state all pertinent details, and give pertinent a	lates, including estimated date of starting any proposed
4/18/95 Ran & cement & 1/4 pps D- (8 hr Waitir	ted 13-3/8" casing @ 462.67' wit -29 Celloflake. Circulated 75 s ng on Cement). Test casing to 1	h 475 sacks Class 'C' w/2% CACL acks cement to surface. 000 psi.
I hereby cartify that the information above is true SIGNATURE TYPE OR FRINT NAME TY	and complete to the best of my provising and belief. MILE Vice- g Northcutt	President DATE 4/24/95 (405) TELETHONE NO. 528-0525

- mu -

DISTRICT I SUPERVISOR

APR 28 1935

_____ DATE ___

CONDITIONS OF APPROVAL, IF ANY: