JIJI'ED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

| Fo.m 9-331 Dec. 1973 | COP1 10 0. C. C. | | C, | Form Approved. Budget Bureau No. 42–R1424 | |
|-----------------------------------|----------------------------------|---|-----|--|--|
| | JIIITED STA DEPARTMENT OF TH | | 5. | ASE (1) 20/ | |
| | GEOLOGICAL SI | JRVEY | 6. | IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| (Do not use thi | Y NOTICES AND RE | PORTS ON WELLS deepen or plug back to a different | 7. | UNIT AGREEMENT NAME | |
| 1. oil | orm 9–331-C for such proposals.) | | 8. | FARM OR LEASE NAME | |
| well [V] | well └─ other | | 9. | WELL NO. | |
| | F OPERATOR SOF OPERATOR | releum Company | 10. | FIELD OR WILDCAT NAME | |
| O. | 1668/2 ×120, 11. | 22, My Tenderst | 11. | SEC., T., R., M., OR BLK. AND SURVEY OR | |
| 4. LOCATIO below.) | N OF WELL (REPORT LOCA | TION CLEARLY. See space 17 | | 33-77-33 | |
| AT SURF AT TOP | ACE: PROD. INTERVAL: | | 12. | COUNTY OR PARISH 13. STATE | |
| | L DEPTH: | CATE NATURE OF NOTICE, | 14. | API NO. | |
| | OR OTHER DATA | NOME INTOKE OF HOMOL, | 15. | ELEVATIONS (SHOW DF, KDB, AND WD) | |
| REQUEST FO | R APPROVAL TO: S | JBSEQUENT REPORT OF: | L | - La CC det | |
| TEST WATER FRACTURE TO SHOOT OR A | REAT | | | r | |
| REPAIR WEL | | L1 | (1) | OTE: Report results of multiple completely by your | |

well [F] gas well 2. NAME OF OPERATOR 1116 Thellys Petroloum Company 3. ADDRESS OF OPERATOR 1 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 2310 FN and 1977 FW Dixes AT SURFACE: AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) hallelin

change on Form 9-330.) APR : 1979 U. S. GEOLOGICAL SURVEY

HOBBS, NEW MEXICO

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates,

INTER Car D'Aires B' 18 P Value Ellingples 5 of WH.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

18. I hereby certify that the foregoing is true and correct

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY: _____ TITLE

DATE

*See Instructions on Reverse Side

RECEPTED FOR RECORD APR 10 1979 J. S. GEOLOGICAL SURVE HOBBS, NEW MEXICO