	_		
NO. OF COPIES RECEIVED	HIDBBS OF E-10 Earli & 10.		
DISTRIBUTION			
SANTA FE FILE		SERVATION COMMISSION	Effective 1-1-65
U.S.G.S.	- l-File	00	5g Indicate Tpelif Lease
LAND OFFICE	┥		State Fee.
OPERATOR	-		5, State Oil & Gas Lease No.
SUNE			
1. Xoll GAS WELL GAS	OTHER-		7. Unit Agreement Name
2. Name of Operator Cil	Bat Bairt Uit		
3. Address of Spergtor Box 249,	9. Well No.		
4. Location of Well			Pale Pelegradion, or Wildcat
		440	Compute describe.
UNIT LETTER,	660 FEET FROM THE BASE	LINE AND DEL FEET	FROM
THE South LINE, SEC	TION 33 TOWNSHIP 188	RANGE	NMPM.
	15. Elevation (Show whethe	τ DF, RT, GR, etc.)	2. County
16. Charl	Appropriate Poy To Indicate	Natura of Nation Disease	a Oak as Dana
	Appropriate Box To Indicate : INTENTION TO:	_	JENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	J
TEMPORARILY ABANDON	PLUG AND ABANDON	COMMENCE DRILLING OPNS.	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
TOTAL ON ALVEN CASING	L.	OTHER	x 🗀
OTHER			
work) SEE RULE 1703.	Operations (Clearly state all pertinent de	tails, and give pertinent dates, inc	luding estimated date of starting any proposed
Well shut in pending development of water flood.			
HAMP COMPANY OF ENGINEERING MANAGEMENT AND ASSESSMENT OF THE PROPERTY OF THE P			
Misc.			
18. I hereby certify that the informat	lon above is true and complete to the best	of my knowledge and belief.	
Original Sign	ed Rv		() ((*)
C. L. WANT	Area	Superintendent	6~16~67
SIGNED			DATE
	i.		
APPROVED BY	TITLE		DATE
CONDITIONS OF APPROVAL, IF A		· · · · · · · · · · · · · · · · · · ·	
SUBSTITUTE OF AFTROVAL,			
	*** ₁₀₀		