Form 9-331 (May 1963)

UNITED STATES SUBMIT IN TRIPLE & & E* DEPARTMENT OF THE INTERIOR (Other instructions on reverse side) GEOLOGICAL SURVEY

LC-032233 (a)
6. IF INDIAN, ALLOTTEE OR TEIBE NAME

SUNDRY	NOTICES	AND	REPORTS	ON V	VELLS
		4-01 +-	deepen on plug	hook to	different management

(Do not use this form for proposals to drill or to deepen or plug back to a Use "APPLICATION FOR PERMIT-" for such proposals.)

Ose All Monthlon 1 of Lawrence and proposition	•
OIL GAS GAS WELL OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
EXXON CORPORATION	BOWERS "A' FEDERAL
3. ADDRESS OF OPERATOR	9. WELL NO.
P.O. BOX 1600 MIDLAND, TX. 79701	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*	10. FIELD AND POOL, OR WILDCAT
See also space 17 below.) At surface	HOBBS (G-SA)
2335 F5L + 2310 FEL	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA
2335' F5L + 2310' FEL SEC 30, 18-5, 38-E	SEC. 30, 18-5, 38-E
	10

14. PERMIT NO.

DF 3654

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF IN	TENTION TO:	SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDON MENT*	_
REPAIR WELL	CHANGE PLANS	(Other)		
(Other) * SFE BELOW	<i>)</i>	(NOTE: Report results of mul Completion or Recompletion R	tiple completion on Well eport and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

* INCREASE LIFT CAPACITY AND GO BACK TO PREVIOUS COMPLETION INTERVAL.

PULL RODS AND PUMP, RELEASE PACKER AND PULL OUT OF HOLE.

RUN RETRIEUING HEAD ON TUBING, LATCH ONTO BP 4 POH. RUN A PERMANENT BRIDGE PLUC ON TUBING AND SETAT 4100'.

CHANCE OUT RODS, TUBING, AND PUMP. PUT WELL ON PRODUCTION

18. I hereby certify that the foregoing is true and correct SIGNED		DATE 7-29-75
(This space for Federal or State office use)		· · · · · · · · · · · · · · · · · · ·
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE

from Sus