	UNI D STA DEPARTMENI OF TH GEOLOGICAL S		SUBMIT IN TRIPL' (Other instructions verse side)	re- 5. LEASE 1	Form approved. Budget Bureau No. 42-R DESIGNATION AND SERIAL	
(Do not use this	IDRY NOTICES AND RI form for proposals to drill or to de Use "APPLICATION FOR PERMIT	EPORTS ON	WELLS o a different reservoir. ls.)		0136272 an, allottee or tribe n	
1. OIL GAS WELL WELL	OTHER			7. UNIT AG	REEMENT NAME	
2. NAME OF OPERATOR				8. FARM O	R LEAST NAME	
Tenne 3. Address of Operator	co Oil Company				USA-Moleen Unit	
Box 1	031, Midland, Texas			U. WELL N	1. 1	
 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL & 660' FEL, Section 31 				10. FIELD AND POOL, OR WILDCAT Undesignated 11. SBC., T., R., M., OR BLK. AND SURVEY OR AREA		
14. PERMIT NO.	· · · · · · · · · · · · · · · · · · ·			Sec. 31	., T-18-S, R-32	
14. PERMIT NO.		ow whether DF, RT, G	1, etc.)	12. COUNTY	OR PARISH 13. STATE	
		73 GL			a. New Mex	
ĸ	Check Appropriate Box To	Indicate Nature			-	
TEST WATER SHUT-OF	PULL OR ALTER CASING	•	WATER SHUT-OFF	SEQUENT REPORT	· · ·	
FRACTURE TREAT	MULTIPLE COMPLETE		FRACTURE TREATMENT		REPAIRING WELL	
SHOOT OR ACIDIZE Repair well	ABANDON*		SHOOTING OR ACIDIZING		ABANDONMENT*	
(Other)	CHANGE PLANS		(Other) (Not:: Report res Completion or Reco	ults of multiple	completion on Well	
press vesve	ed to 1000 psi for 30 :	min alter w	JC 32 nrs. Hel	d OK.		
				 A. Shendara and an analysis of the second sec		
3. I hereby certify that th	he foregoing is true and correct			1. Solution of the statement of the s		
SIGNED	J.F. Carnes	ITLE Dist. F	rod. Foreman		April 20, 196	
SIGNED (This space for Federal	J.F. Carnes	ITLE Dist. F	rod. Foreman		April 20, 196	
SIGNED	J.F. Carnes J.F. Carnes I or State office use)	ITLE	APp		April 20, 196	

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