Form 9-331 (May 1963)

## UNIT D STATES DEPARTMEN) OF THE INTERIOR (Other Instructions (Other Instructions (Other Instructions))

SUBMIT IN TRIPLIC

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

10. FIELD AND POOL, OR WILDCAT Undesignated

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

9. WELL NO.

NM-13422A - NM-13422D GEOLOGICAL SURVEY

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.

Use "APPLICATION FOR PERMIT " for such proposals.)	
1.	7. UNIT AGREEMENT NAME
WELL GAS WELL XX OTHER	
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
Petroleum Development Corporation	Dorothy-McKay Federal

3. ADDRESS OF OPERATOR

9720-B Candelaria, N. E., Albuquerque, New Mexico LOCATION OF WELL (Report location clearly and in accordance with any State requirements,\* See also space 17 below.)
At surface

1650' FSL & 1650' FEL, Section 9-19S-32E.

		Sec	.9,	T-199	5 <b>,</b> I	R=32E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR. etc.)	12. COUN	TY OR	PARISH	13.	STATE
	3643GL	Lea	ı	į.	N.M	exico

16.

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

NOT	ICE OF INTE	NTION TO:	SUBSEQUENT REPORT OF	r:
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL		PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS	WATER SHUT-OFF  FRACTURE TREATMENT SHOOTING OR ACIDIZING  (Other) Surface casing.	PAIRING WELL, TERING CASING ANDONMENT®
(Other)			(Note: Report results of multiple con Completion or Recompletion Report ar	mpletion on Well ad Log form.)

Ran 10 jts. 13-3/8" 54.5# casing. Set @ 385" with 450 sx. Class H cement, 2% CaCl, with 2% gel, circ. out 25 sx. cement. PD @ 7:30pm, 1/14/76. WOC 11 hrs. Tested BOP and casing to 700 psi for 30".

18. I hereby certify that the foregoing is true and correct		
SIGNED	TITLE	Vice President DATE 1/14/76
(This space for Federal or State office use)	TITLE	ACCEPTED FOR RECUMU
CONDITIONS OF APPROVAL, IF ANY:		FEB 3 1976

\*See Instructions on Reverse Side GEOLUGIO MEXIC

<sup>17.</sup> 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.) \*