n 3160-5		TATES	FORM APPROVED
: 1990)	DEPARTMENT OF 1		Budget Bureau No. 1004–0135 Expires: March 31, 1993
	BUREAU OF LAND		5. Lease Designation and Serial No
	SUNDRY NOTICES AND	REPORTS ON WELLS	6 If Indian, Allottee or Tribe Name
n not use this for	rm for proposals to drill or to	b deepen or reentry to a different reserve	
U:	SE "APPLICATION FOR PERM		7. If Unit or CA. Agreement Designation
Type of Well			EUNICE MONIMENT South Unit - B
Oil Gas   Well Well   Well Other			8. Well Name and No #909
Name of Operator	USA INC.	Rn 4112	9 API Well No 30-025-04 300-150-4314
		79707 AHA. J. A. CARTER	10. Field and Pool, or Exploratory Area
Location of Well (Footage	e. Sec., T., R., M., or Survey Description	79702 AHN: J.A. CARTER	Eurice Manunert
SEC 24	T205 R36E		LEA Co., New MEXICO
1980 F.	NL \$ 1980 FEL		
CHECK	APPROPRIATE BOX(S) TO	INDICATE NATURE OF NOTICE, RE	
TYPE OF	SUBMISSION	TYPE OF AC	
Notice o	fIntent	Abandonment	Change of Plans
_ <b></b>		Plugging Back	Non-Routine Fracturing
Subseque	ent Report		Water Shut-Off
	Notice	Altering Casing	Conversion to Injection
Einal At	bandonment Notice	Other	Dispose Water
Describe Proposed or Co	ompleted Operations (Clearly state all pertine	ent details, and give pertinent dates, including estimated date o	(Note: Report results of multiple completion on We. Completion or Recompletion Report and Lig form f starting any proposed work. If well is directionally druled
Describe Proposed or Co give subsurface loca EV- 330	mpleted Operations (Clearly state all pertine ations and measured and true vertical depth g/u4fe well. Se 0 - 4400. Stimu	ent details, and give pertinent dates, including estimated date on his for all markers and zones pertinent to this work.)* electively percharate Late AS NEEded.	Completion or Recompletion Report and Ligiorm f starting any proposed work. If well is directionally druled
give subsurface loc: <i>FV</i> <u>330</u> 3000 <i>x</i>	alions and measured and true verdual deput alions and measured and true verdual deput of 4400. Stimu poi 60PE CL NAME CRANGE :	lectively personate Late as NEEded.	Completion or Recompletion Report and Ligiorm f starting any proposed work. If well is directionally druled
give subsurface loc: <i>FV</i> <u>330</u> 3000 <i>x</i>	alions and measured and true verdual deput alions and measured and true verdual deput of 4400. Stimu poi 60PE CL NAME CRANGE :	ent details, and give pertinent dates, including estimated date of his for all markers and zones pertinent to this work.)* letctively percharate late as needed. 1 to EMSUB #909	Completion or Recompletion Report and Lig-form f starting any proposed work. If well is directionally druled
give subsurface loca <i>FV</i> 330 3000 <b>* N</b> <i>F</i>	allons and measured and true verdual deput allons and measured and true verdual deput of a bope cl NAME CHANGE : From Gillubly A # 1. Sticled in is Approved.	lectively personate Late as NEEded.	Completion or Recompletion Report and Lig-form f starting any proposed work. If well is directionally druled
give subsurface loca EV 330 3000 ¥ NE J.J. 14. [ hereby certify that d	alions and measured and true verdual deput alions and measured and true verdual deput alions of the second deput of a bope cl NAME CHANGE : From Gillubly A # 1 Statistic M	lectively personate Late as NEEded.	Completion or Recompletion Report and Ligiorn if starting any proposed work. If well is directionally druled injection intoreval
give subsurface loca EV 330 3000 K NE J. 14. I hereby certify that d Signed	allons and measured and true verdeal depart allons and measured and true verdeal depart 0 - 4400. Stimu poi BOPE cl NAME CHANGE : From Gillubly A # 1. Sticled in the Aggregation by Dente	lectively personate Late as NEEded. 1 to Emsus #909 Tile Delicing Engin	Completion or Recompletion Report and Ligiorn if starting any proposed work. If well is directionally druled injection intoreval
give subsurface loca EV 330 8000 K NE F J J 14. I hereby certify that the Signed	Aluate well. Se alions and measured and true verdea depar- alions and true verdea depar- al	lectively personate Late as NEEded. 1 to Emsus #909 <u>Tide Drilling Engin</u>	Completion or Recompletion Report and Ligiorn is starting any proposed work. If well is directionally druled injection intoreval SER Date <u>1-24-91</u>

\*See Instruction on Reverse Side