UNITED STATES DADTMENT OF THE INTERIOR

5. LEASE	
LCO-461 64 B NM18264	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	

DEPARTMENT OF THE INTERIOR	1 100-401-64-B /YM/18267	
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME	
1. oil gas	Federal "D" Acch. A	
well 🖾 well 🗀 other	9. WELL NO.	
2. NAME OF OPERATOR Warrior, Inc.	3	
3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT I	NAME .7-Rivers Queen
Box 17479, Fort Worth, Texas 76102 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1980' FNL & 660' FEL	11. SEC., T., R., M., OR I AREA Sec. 27, West Eunice	BLK. AND SURVEY OR T20S, R36E,
AT TOP PROD. INTERVAL: Same	12. COUNTY OR PARISH Lea	13. STATE New Mexico
AT TOTAL DEPTH: Same	14. API NO.	New Mexico
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. AFI NO.	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW 3592 DF	/ DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3372 01	
TEST WATER SHUT-OFF U FRACTURE TREAT TEST WATER SHUT-OFF U T TEST WATER SHUT-OFF U T		
SHOOT OR ACIDIZE 😾 🗍		
REPAIR WELL PULL OR ALTER CASING	NOTE: Report results of m	ultiple completion or zone
PULL OR ALTER CASING	in in its conform 9-	-330.)
CHANGE ZONES	£ 1979	
ABANDUN*		
U. S. GEOL	OGICAL SURVEY	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (CLASS Stating and proposed work. If well is different measured and true vertical depths for all markers and zones pertinent.	irectionally drilled, give sub	give pertinent dates, esurface locations and
 Pull rods and tubing; test Circulate hole 		
3. Run pipe inspection and cement bond	d log	
4. Deepen 150' to 4225'	6	
5. Run log on new hole		
6. Selectively perforate and reperfora	ate zones from	3700 to 4225'
7. Hydraulically fracture & treat zone	es from 3/00 to	4225
8. Put on pump and test		
	÷	
Subsurface Safety Valve: Manu. and Type	Set	@ Ft.
18. I hereby certify that the foregoing is true and correct		
SIGNED TITLE V.P. Expl. & 1	Prod _{DATE} Octobe	r 2, 1979
(This space for Federal or State off	ice use)	

_ TITLE .

*See Instructions on Reverse Side