Form 9-331 (May 1963)

FRACTURE TREAT

REPAIR WELL

(Other)

SHOOT OR ACIDIZE

UNI. D STATES SUBMIT IN TRIPLI E. DEPARTMENT OF THE INTERIOR (Other Instructions on re-

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

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

ALTERING CASING

ABANDON MENT*

Drilling

15906

	M. WIL CONS. COMMISSION	NM
SEOLOGICAL SURVEY	DOY 1000	1411

	GEOLOGICAL SURVEY	P. O. BOX 1980	1			
	OTICES AND REPORTS Coposals to drill or to deepen or plug be ICATION FOR PERMIT—" for such pre	HOBYME INESW MEXICO	6. IF INDIAN, ALLOTTEÉ	OR TRIBE NAME		
1. OIL GAS WELL OTHER			7. UNIT AGREEMENT NAME			
2. NAME OF OPERATOR			8. FARM OR LEASE NAME			
Ike Lovelady, Inc. 3. ADDRESS OF OPERATOR			Sam H. Snoddy Fed. 9. WELL NO.			
P.O. Drawer 266	6; Midland, Texas	79702	1			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660 FNL & 660 FEL			10. FIELD AND POOL, OR	10. FIELD AND POOL, OR WILDCAT		
			Wildcat 11. SEC., T., B., M., OR B SURVEY OR AREA	LK. AND		
			Sec.26,TW	P 20-S,R-3		
14. PERMIT NO.	15. ELEVATIONS (Show whether DF,	15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OR PARISH 13. STATE		
	GR 3555.3		Lea	New Mexi		
16. Check	Appropriate Box To Indicate N	ature of Notice, Report, or	Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:				
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING W	ELL.		

(Note: Report results of multiple completion on Well Completion or Recompletion Report 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.) •

8/3/82 to 9/1/82 Drilling 8-3/4" Hole to 13,433'.

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

OIL & OAS U.S. GEOLOGICAL SURVEY ROSWELL, NEW MEXICO

18. I hereby certify hat the foregoing is true and correct SIGNED COPPLED FOR RECORD		Mgr.	of	Drlg.	& Prod.	DATE 9/1/82	_
(This space for Federal or State office use) (ORIG. SGD.) DAVID R. GI	LASS TITLE					DATE	_
U.S. GEOLOGICAL SURVEY ROSWELL, NEW MEXICO	e Instruc	tions on	Rever	se Side			

OCT 14 1982
HOSES OFFICE