		-		
( <b>May</b> 1000)	NIT ) STATES	SUBMIT IN TRIPLIC		u No. 42–R1424.
DEPARTMEN', JF THE INT		UR verse side)	5. LEASE DESIGNATION AND SERIAL NO.	
GEOLOGICAL SURVEY			NM-17067 6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
(Do not use this form for proposals Use "APPLICATION	ES AND REPORTS C s to drill or to deepen or plug b ION FOR PERMIT for such pr		G. IF INDIAN, ALLOTTER	OR TRIBE NAME
I. OIL GAS WELL VY OTHER			7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR			Ojo Chiso Unit 8. FABM OR LEASE NAME	
American Quasar Petr Address of Operator	<u>cleum Co. of New</u>	v Mexico	9. WELL NO.	
606 Vaughn Bldg., Midland, Texas 7970 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface			2	
			10. FIELD AND POOL, OR WILDCAT Undesignated	
			11. SEC., T., B., M., OR B	
2080' FEL & 1980' FS	L, T22-S, R34-E,	, Section 15	SUBVEY OR ABEA Sec. 15, T22	
4. PERMIT NO.	15. ELEVATIONS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH	
	3500' GR		Lea	NM
Check Appro	opriate Box To Indicate N	ature of Notice, Report, or (	Other Data	
NOTICE OF INTENTIO	N ТО:	SUBSEQ	UENT REPORT OF:	
TEST WATER SHUT-OFF	L OR ALTER CASING	WATER SHUT-OFF	REPAIRING W	ELL
FRACTURE TREAT MUL	LTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CA	SING
	NION* XX	SHOOTING OR ACIDIZING	ABANDONMEN	r*
CHA	NGE PLANS	(Other)	of multiple completion o	n Well
DESCRIBE PROPOSED OR COMPLETED OPERAT proposed work. If well is directional	CIONS (Clearly state all pertinent	details and give pertinent dates	letion Report and Log form , including estimated date	of starting any
by placing plugs as 1 100 sx @ 13,200-400' 50 sx @ 12,715 50 sx @ 12,400 50 sx @ 11,816 50 sx @ 11,550 (Both 50 sx @ 4,400-4,600 50 sx @ 3,400-3,600 50 sx @ 1,700-1,900 10 cx Letin	tom of 7 5/8") 0 0 0	CONTACT THIS OF	FICE REGARDING AB	
		BEFORE MAKING F	INAL CLEANUR	
. I hereby certify that the foregoing is tru SIGNED Jack Fatchell Jack		rations Engineer	DATE <u>12-1</u>	9-74
(This space for Federal or State office us	8e )		······································	
APPROVED BY CONDITIONS OF APPROVAL, IF ANY :	TITLE :	(P) ~ e	DATE	
	*See Instructions of	on Reverse Side	(TA)	

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