Form 9-331 (May 1963)

## UNI D STATES SUBMIT IN TRIPLI (Other Instructions verse side)

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

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• `	6. LEASE DESIGNATION AND SERIAL NO.  LC 031695 (b)  6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	7. UNIT AGREEMENT NAME

SUND (Do not use this fo	6. IF INDIAN, ALLOTTER			
OIL GAS WELL	OTHER		7. UNIT AGREEMENT NA	ME V
2. NAME OF OPERATOR  CONTINE  3. ADDRESS OF OPERATOR	NTAL OIL CO	MPANY	WARRE.	VUNIT
4. Eduation of Well (Re) See also space 17 below At surface	ort socation clearly and in Accordance with	1.88240	10. FIELD AND POUL, O	
	16 \$ 1980'FEL 0	f SEC. 27	11. SEC., T., R., M., OR ISURVEY OR AREA	05.R386
14. PERMIT NO.	15. ELEVATIONS (Show whet	her DF, RT, GR, etc.)	12. COUNTY OR PARISH	N.M.
16.	Check Appropriate Box To Indica	ate Nature of Notice, Report, or	Other Data	

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NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:				
				l l		1	
TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WELL	
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING	
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING		ABANDONMENT*	
REPAIR WELL		CHANGE PLANS		(Other) 567 P	RO	DucTION CSG.	
(Other)				(Note: Report resu Completion or Reco	nts mple	of multiple completion on Well etion 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.)\*

DRLD. 83/4" HOLE TO TO 7070', SET 7" 23 & 26 Lb. K-55 CSG. AT 7070'. CMTO. IN 2-STAGES W/ DV Tool AT 3918'; 1st stage 650 SX. CLASS"C"CMT; 2nd STAGE 600 SX. CLASS"C"CMT. PD AT 4:50 AM 2-15-76. WOC 72 HRS. TESTED CSG. To 1000 psi, HELD OK.

18. I hereby certify that the foregoing is true and cornsider. A. Marier and cornsider	TITLE SR.	ANALYST	DATE 3-3-76
(This space for Federal or State office use		00.050	
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	(1897) IN MANAGE	_ DATE

"See Instructions on Reverse Side Williams of Reverse Side Williams of