- Form 9-331 (May 1963) DEPAR	UNIT STATES	SCBM (cl. IN app P 14) (Conjert Instation past and a state (Verse side)		reau No. 42-R1424.
	GEOLOGICAL SURVEY	P. Q. TVP 530	NM 17	252
SUNDRY NO	TICES AND REPORTS C	HADDA! HEIL HIMINAA	O. IF INDIAN, ALLOT	TEL OR TRIBE NAME
(1)0 not use this form for pro Use "APPL	posals to drill or to deepen or plug be ICATION FOR PERMIT-" for such pr	ack to a different reservoir. oposals.)		
1.			7. UNIT AGREEMENT NAME	
OIL CAS WELL VELL KX OTHER			S. FARM OR LEASE NAME	
2. NAME OF OFBATOR Alpha Twenty-One Production Company			Colvin Federal	
3. ADDEESS OF OF BRATOR			9. WELL 30.	
P.O. Box 1206, Ja1, NM 88252 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			1 10/ FIELD, AND POOL,	OR WILDCATY
A. LOCATION OF WELL (helport location creatly and in controlled with the surface			Wildow touse . Ta.	
660' FNL - 3 00' FEI <i>330</i>	L, Sec. 17, T-20-S, R-3	9-Е	11. 88C., T., B., M., O SUBURY OR AR	BA
14. PERMIT NO.	15. BERVATIONS (Show whether DF.	RT. GR. etc.)	Sec. 1/, 1- 12. COUNTY OR PARK	20-S, R-39-E SH 13. STATE
IT. PERMIT AU.	3539' GL		Lea	NM
16. Check	Appropriate Box To Indicate N	ature of Notice, Report, or (Other Data	
NOTICE OF IN	•••		UENT REPORT OF:	
1EST WATER HUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRIN	G WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING	
SHOUT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDON	CENT* XX
REPAIR WELL	CHANGE PLANS	(Other) (Note: Report result	s of multiple completion pletion Report and Log	n on Well
Set CIBP at top of Set CIBP at top of (Base Salt - 2	from 1080' - 980' acro plug at Surface,	ice 25' cement on top 885') and place 200'	o of CIB P. cement on to	
Plugging work was compl	leted 2-24-84. Locatio 417' of 5-1/2" casing n	n will be cleaned wh not recovered.	ROS AND	p 1014' FEB 28 10 02 MIRI
18. I hereby certify that the foregot SIGNED Michael D. Oney (This space for Federal or State Orig : Sgd : Contact		1. Superintendent		7-84
APPROVED BY Ares A CONDITIONS OF APPROVAL, I	TITLE		DATE	

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*See Instructions on Reverse Side

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