Form 0-311 (May 1063)	DEPARTMEN :	STATES OF THE INTERIO	SUBMIT IN TRIPLICAT (Other Enstructions verse side)	re Budget B	oroved, ureau No. 42-R1424, ION AND SERIAL NO.
S	SUNDRY NOTICES A	ND REPORTS ON	I WELLS	6. IF INDIAN, ALLO	TTEE OR TELBE NAME
Total Control of the	al Oil Commany				
See also space 1' At surface	460, Hobbs, New Mex	accordance with any Sta		10. FIELD AND POOL ELMA 11. SEC., T., R., M., G SURVEY OR AL	r Welew

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3112 16. Check Appropriate Box To Indicate Nature 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 WELL FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING ABANDONMENT* REPAIR WELL CHANGE PLANS (Other) (Other) (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.) Status of Well: Shut - In Approximate date that temp. aban. commenced: //-/- 73 Reason for temp. aban.: Uneconomic Future plans for Well:

Will convert to injection

Approximate date of future W. O. or plugging: 15 GTR. 1975					
18. I hereby certify that the foregoing is true and correct SIGNED	TITLE Division Office Manager	DATE 10/30/79			
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	APPROVED			

*See Instructions on Reverse Side n. El mar Partners (9)

USGS-5