	— N.M.O.C.D. COF	γ			
Form 9-331 (May 1963) U.v. TED STATES SUBMIT IN TRL CATE* DEPARTMENT OF THE INTERIOR Other Instructions on re- verse side) GEOLOGICAL SURVEY			Budget Knr	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. 030187 6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
SUNDRY N (Do not use this form for p Use "APF	030187				
I. OIL GAS WELL OTHE	7. UNIT AGREEMENT NAME				
2. NAME OF OPERATOR Apollo Oil Company	8. FARM OR LEASE NA	8. FARM OR LEASE NAME LaMunyon Federal 9. WELL NO.			
3. ADDRESS OF OPERATOR Box 1737, Hobbs, N	9. WELL NO.				
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface			#4 10. FIELD AND POOL, OB WILDCAT		
660' from the Nort	h line and 1981.4' fro	om the West line of	Langlie Ma 11. SEC., T., R., M., OR SUBVEY OR AREA	BLK. AND	
4. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)			Dec 2/ - 2- 12. COUNTY OR PARISE		
			Lea	NM	
6. Check	Appropriate Box To Indicate	Nature of Notice, Report, or (Other Data		
NOTICE OF IN	TENTION TO :	1	UENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING V	VELL	
SHOOT OR ACIDIZE	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CA	ABING	
REPAIR WELL	CHANGE PLANS	SHOOTING OR ACIDIZING	ABANDONMEN	·T+	
(Other) 7. DESCRIBE PROPOSED OR COMPLETED proposed work. If well is dire nent to this work.)*		(NOTE: Report results	of multiple completion	on Well	
2. Install pumping 3. Install rods.	1 BOP, pull tubing and	d clean out to T/D. H	tun tubing and 1	rods	
	ro bmubrug∙			•	
ECENED)				
BILL RIDGE	JRVEY		•	. w	
GEOLOGICAL ME	XICO				
RECEIVED NECEIVED NECEIVED NEV FORES, NEW ME					
	0				
I hereby certify that the foregoing SIGNED	Kalt	wner/operator	DATE 10	3 _80	
(This space for Federal or State off APPROVED BY	,				
CONDITIONS OF APPROVAL, IF	ANY:				
	*See Instructions		CT 2.0. 1980		
			RICT SUPERVISOR		

OIL CUNSERVATION DIV

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