Form 9-331

16.

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

IINITED STATES SUBMIT IN TRIPLICATE

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Ĭ -	15.	LEASE	DESIGN	ATION	AND	SERIAL	NO.

(May 1933)	DEPARTMENT OF THE INTERIOR (Other Instructions on verse side)							
	GEOLC ICAL SURVEY							
(Do	SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)							
1.								

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

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7. UNI	T AGREEMENT	NAME		
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8. FAB	M OR LEASE	NAME		
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Duc.	18 T-Z	65 7	-32	F
12. cc	UNIT OR PAR	ISH 13.	STATE	
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660' FSL 9 1,980' FWL of Sec. 18

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

NOTICE OF INTENTION TO:

3.221 BR

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

WATER SHUT-OFF FRACTURE TREATMENT

SHOOTING OR ACIDIZING

ALTERING CASING ABANDONMENT*

REPAIRING WELL

(Note Report results of multiple completion on 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 perti-

Pullet producing equipment. Set setainer Q. 4,143. Squeget first. 4,362'-4,382' 4/150 sache Case C' Cement. Ban 434" hit and Intles out stainer a coment to 4,383. Chand out to 4,440'. Tester squeeze by swalling bale dry. Perf. 4,363-4,368' W/1 JSPF (6 chate). Set Phr. Q 4,305 and total. perfx. 4,363-4,368 W/500 galx. 15% HCL-NE Wiel. Swilled well. Kan producing equipment well link on production

TITLE Sicision Office Manager DATE 1-22-74 (This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

US65-5, File