Form 9-331 (May 1963)	UNITED STATES SUBMIT IN TRIPLICATE (Other instructions on The INTERIOR verse side) GEOLOGICAL SURVEY COPY TO O. C. C.					Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. NM 18644 6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
SUN (Do not use this	IDRY NO	TICES AND REI	PORTS Coen or plug ba	N WELLS ack to a different reservoir.	6. IF INDIA	i, ALLOTTEE	OR TRIBE NAME	
OIL X GAS WELL OTHER						7. UNIT AGREEMENT NAME		
2. NAME OF OPERATOR						8. FARM OR LEASE NAME		
HNG Oil Company						Wilson 9 Federal		
3. ADDRESS OF OPERATOR						9. WELL NO.		
P. O. Box 2267, Midland, Texas 79702						2		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*						10. FIELD AND POOL, OR WILDCAT Und.		
See also space 17 below.) At surface						Comanche Stateline Yates 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA		
660' FSL & 660' FWL of Sec. 9						Sec. 9, T26S, R36E		
14. PERMIT NO.	· _ · · · · · · · · · · · · · · · · · ·	15. ELEVATIONS (Sho	whether DF,	RT, GR, etc.)		ļ		
		29581	GR		L	ea	NM	
16.	Check /	Appropriate Box To	Indicate N	ature of Notice, Report, o	r Other Data			
NOTICE OF INTENTION TO:						UENT REPORT OF:		
				THE PROPERTY OF THE		REPAIRING W	ELL	
TEST WATER SHUT-	OFF .	PULL OR ALTER CASING	3	WATER SHUT-OFF		ALTERING CA		
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT	ll	ABANDONMEN		
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING Ext	ension of		X	
REPAIR WELL	PAIR WELL CHANGE PLANS (Other)					ts of multiple completion on Well		
(Other) Completion or Recomp 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates						pletion Report and Log form.)		
proposed work. I nent to this work.) To request a	enproval	ctionally drilled, give su	nded to	one year from the		all markers	and zones perti-	
	E Co Un	less Drilling O	perations Trilling	have approval	u. s. geol	18 1979	SUR VE Y	
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IS. I hereby certify that the foregoing is true and correct

SIGNED Betty R. Gildon

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

ACTING DISTRICT ENGINEER

ACTING DISTRICT ENGINEER

CHVED

JUN 1 9 1979

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