Form 9-331	UNITED STATES SUBMIT IN TRIPLICATE.					Form approved. Budget Burean No. 42-R1424.		
(May 1963)	DEPARTMEN F THE INTERIOR (Other Instructions of re-				5. LEAS	5. LEASE DESIGNATION AND SERIAL NO.		
	GEOLOGICAL SURVEY					052956	•	
	<del> </del>						OR TRIBE NAME	
SU	NDRY NOT	rices and repo	ORTS ON	WELLS			f = 12 .	
(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.						AGREEMENT NA	31Z,	
OIL T GAS	П	Water Injecti	On		Ton	alio-Toli	IIni+	
WELL WELL  2. NAME OF OPERATOR		water injecti	<u> </u>			glie-Jal   OR LEASE NAM		
					0	•	in the second se	
		m Corporation			9. WELI	NO.		
3. ADDRESS OF OPERATOR						4.1.		
1300 Wilco Building, Midland, Texas 79701						D AND POOL, OF	R WILDCAT	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)								
At surface						Langlie-Mattix (Queen) 11. sec., T., E., M., OR BLK. AND		
					11. Bac	URVEY OR ARDA		
	2		U. S	. Cióllich and l		g		
	r "H" 1650'	FNL & 330' FEL		حسنه والبراء والمراب			S, R-37-E	
14. PERMIT NO.			ELEVATIONS (Show whether DF, RT, GR, etc.)			NTY OR PARISH	3 4 3	
		3251' DF			Lea	3757	New Mexico	
TEST WATER SHU FRACTURE TREAT SHOOT OR ACCIZE REPAIR WELL (Other) Clea		PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON® CHANGE PLANS		WATER SHUT-OFF  FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (Note: Report re Completion or Re	esults of multip	ABANDONMEN  ort and Log for	ASING NT*	
17. DESCRIBE PROPOSEI proposed work. nent to this work	O OR COMPLETED OF If well is direct k.)*	ERATIONS (Clearly state al ionally drilled, give subsu	Il pertinent deta	ilu and give partinent	lates including	estimated date	e of starting any	
		ng and packer.						
		to original TD						
	-	ll to TD of 3695	o' (6-1/8''	hole).				
	Log well t				_ ;			
		kimately 443' of			sx. Class	"C". (Te	st csg.)	
		Seven Rivers Qu	ieen Zone.					
		if necessary.						
8.	Run tubing	g and packer.	1		Ę	-古漢草		
· 9.	Place well	l back on water	injection	•	4			
						kij i l		
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18. I hereby certify that the foregoing is true and correct DATE May 23, 1975 TITLE Gas Measurement Analyst SIGNED: \*See Instructions on Reverse Style 28 1975 (This space for Federal or State office use)