Form 9-331 - May 1963

U. TED STATES N M CHUBART INTENTIONS OF THE INTERIOR SPISE SHOP

Form approved.
Budget Bureau No. 42-R1424.

	DEPARTMENT OF THE GEOLOGICAL SI		DBBS NEW MEXICO			AND SERIAL NO	
	SUNDRY NOTICES AND RE (Do not use this form for proposals to drill or to dee Use "APPLICATION FOR PERMIT-	PORTS (ON WELLS	6. IF IND		OR TRIBE NAME	
0tt. == 638 ===				7. (NIT A	7. CNIT AGREEMENT NAME		
2.	WELL X WELL OTHER NAME OF OPERATOR			S FARM	OR LEASE NAM	E	
Alpha Twenty-One Production Company					Buckskin Federal		
3 .	ADDRESS OF OPERATOR				9. WELL NO.		
. -	2100 First National Bank Building, Midland, Texas 79701 Location of Well (Report location clearly and in accordance with any State requirements.* See also space 17 below.)				5 10. FIELD AND POOL, OR WILDCAT		
	990 FWL and 330 FSL, Section 18, T24S, R38E			11. SEC.,	Dollarhide-Tubb Drinkard 11. SEC., T., B., M., OB BLE. AND SURVEY OR AREA		
				Sec.	18, T24	S, R38E	
14.	PERMIT NO. 15. ELEVATIONS (Sh	ow whether DF	, RT, GR, etc.)	12. coc N	TY OR PARISH	13. STATE	
_	3174 Gro	und Leve	21	Lea		New Mexico	
6.	Check Appropriate Box To	Indicate N	lature of Notice. Report.	or Other Date	a		
	NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
	TEST WATER SHUT-OFF PULL OR ALTER CASING	G	WATER SHUT-OFF		REPAIRING W	TRIT.	
	FRACTURE TREAT MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CA		
	SHOOT OR ACIDIZE ABANDON*		SHOUTING OR ACIDIZING	G	ABANDONMEN	T*	
	REPAIR WELL CHANGE PLANS		(Nore: Report r	esults of multiple	e completion	n Well	
	Other) DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly State	X nll nertinen	Completion or Re	ecompletion Repor	rt and Log for	m.)	
	proposed work. If well is directionally drilled, give su nent to this work.)* An extension of one addition this well is respectfully reques	nal year					
	US CHO 10 1981 III						
					ROME STORY .		
)		70 × 50 × 50	·····································	CC		
1 6	I hereby cartify that the faregating is true and correct						

-,		
SIGNED Tommy Philops	TITLE Executive Vice President	DATE December 9, 198
(This space for Federal or State office use)		
APPROVED & APPROVED ** CONDITIONS OF APPROVAL IF ANY AS AMENDED	TITLE	DATE
AS AMELIE	* APOROVIO DES	6 1000 ter annance
DEC 1, 1 1981		
*S	ee Instructions on Reverse Side	23,1982
JAMES A. GILLHAM		

DISTRICT SUPERVISOR