| Form 9-331 (May 1963) | UN ED STATES DEPARTMENT OF THE INTER GEOLOGICAL SURVEY | SUBMIT IN TRIPI (Other instructions re- | Form approved. Budget Bureau No. 42-R1424. LC-0324-50-B |
|--|---|--|--|
| (Do not use | SUNDRY NOTICES AND REPORTS this form for proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT" (APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT" (APPLICATION FOR PERMIT) (APPLICATION FOR PERMIT — APPLICATION FOR PERMIT — | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 1. OIL GAWELL GAWELL 2. NAME OF OPERAT | ELL OTHER Wrilling | | 7. UNIT AGREEMENT NAME South Mattix Unit Fed 8. FARM OR LEASE NAME |
| At surface | Flosia New Maxino 88240 | t | 9. WELL NO. 25 10. FIELD AND POOL, GR. WILDCAT FOW ER ELENBUGER 11. SEC., T., R., M., OR BLE, AND SURVEY OR ALEA SURVEY OR ALEA |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether Di | F, RT, GR, etc.) | 15-34-37 NMPM 12. COUNTY OR PARISH 13. STATE LEA NM |
| 16. | Check Appropriate Box To Indicate N NOTICE OF INTENTION TO: | | Other Data |
| FRACTURE TREAT SHOOT OR ACIDE REPAIR WELL (Other) 17. DESCRIBE PROPOS | T MULTIPLE COMPLETE ZE ABANDON* CHANGE PLANS | WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR AIDIZING (Other (Note: Report results Completion or Recompl | REPAIRING WELL ALTERING CASING ABANDONMENT of multiple completion on Well letion Report and Log form.) |
| Ord A | ork.) * | mons and measured and true vertical | 30 PM 10-29-68. NO Was Del Often Thomas Del Often Thomas Del |
| @ 700. 24 hour | w/800 s'4. neat. Ceme s, Lested Casury w, D.K. | | efter HOC 20 min. |

Reduced hole to 11" @ 710 and resumed arelling operations.

AREA SUPERINTENDENT

SIGNED

(This space for Federal or State office use)

APPROVED BY

APPROVAL, IF ANY:

DATE

DATE

DATE