CAN DE TOTALS	5. LEAGE
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DEFARTNER OF THE BRIDE	6. mag LC-031756 (b)
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SUPPRIVE HOLLORS AND THE PRIVATE CALWELLS (Denote the different research, the form for the order to be decided and the state of the second to be defended.	7. UNIT AGRETIMENT MAME E. TACM OR LEASE NAME
1. cil Woll EX Well Dottor 2. NAME OF OPERATOR Amoco Production Company 3. ADDRESS OF CHERTOR P.O. Drawer "A", Levelland, Texas 79336 4. LOCATION OF WELL (REPORT FOUATION CLEARLY, See space 17 below.) AT SURFACE: 1930 FML & 1980 FEL, Sec. 21 (Unit G, AT TOP PROD. INTERVAL: SW4, NE%) 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF DESTRUCTOR OF ACIDIZE DESTRUCTOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF DESTRUCTOR ACIDIZE DE ACIDIZE D	Gillully "B" Federal 9. VELL NO. 19 10. FIELD OR VILLEMAT NAME Honuscart Tubb 11. SLC., T., R., M., OR BLK. AND SURVEY OR AREA 21-20-37 12. COUNTY OR PARISH: 13. STATE Lea. NM. 14. API NO. 15. FLEVATIONS (SHOW DF, KDS, AND WD) 3510.2 GR REGELVED (NOTE: Report results of DECILE, 1978 or zone change on Form 9-330.) U. S. GEOLOGICAL SURVEY HO3BC, NEW MEXICO
ABANDON* (other) Extension X	(MDS, NEW MEMOS
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertined. Request extension of drilling permit for 90 d	firectionally drilled, give subsurface locations and ne to this work.)*
	Section 1
•	•
لاً في بن بن	
	STORE A
Unless 3-31-11	
Fax - 108	
Subsurface Safety Valve: Manu, and Type	Set @ Ft.
18. Thereby certify that the foregoing is true and correct	
	alyst _{DATE} December 14, 1978
(This space for Federal or State of	fice tise)

APPROVED BY ______CONDITIONS OF APPROVAL, IF ANY: 0+4-USGS-H

1-Houston

1-SUSP

1-DE

*See Instructions on Reverse Side

ACTING DISTRICT ENGINEER