DEPARTMENT OF THE INTERIOR verse side)	TRIPLICATE Form approved. Budget Bureau No. 42-R1424. LEASE DESIGNATION AND SERIAL NO.
SUNDRY NOTICES AND REPORTS ON WELLS	6. IF INDIAN, ALLOTTER OR TRUE NAME
Use "APPLICATION FOR PERMIT—" for such proposals.)	servolr. Navaja. 7. UNIT AGREEMENT NAME
WELL WELL OTHER TRY 2. MANS OF OPERATOR 4 1 1	8. EARM OR LEASE NAME
207 N. Orchard Farmington NH	led Kimpart
4. LOCATION OF WELL (Report location cleafly and in accordance with any State requirements.* See also space 17 below.) At surface 900//Y; //55/W	10. FIELD AND POOL, OR WILDCAT TO STATE OF THE CIC 11. SEC., T., R., M., OR BUK, AND SURVEY OR AREA \$ 3. 1744 M. A. M.
14. PSEMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5/23 gl.	12. COUNTY OR PARISH 13. STATE
16. Check Appropriate Box To Indicate Nature of Notice, F	Report, or Other Data
FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) PULL OR ALTER CASING MULTIFLE COMPLETE ABANDON* SHOOTING OR A (Other)	ALTERING CASING CIDIZING ABANDONMENT* Export results of multiple completion on Well on or Recompletion Report and Lordon
Propose to spot 25 sks Pull 7/2 csq and 4/2	851-726
Spot 10 SKS SURFACE Frect marker MAR 1811	
I hereby certify that the foregoing is the and correct SIGNED Leghen II lune gritte ferroler (This space for Federal or State office tise)	DATE 2/27/74.
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	DATE