of the carlier submittal.

Ι.						
		yes no				
II.						
	Address: Suite 1250 - 125 N. Market, Wichita, Ks 672					
	Contact party: Doy C. Deem Phon	e: (316) 265-1731				
II.	 Well data: Complete the data required on the reverse side proposed for injection. Additional sheets may 	of this form for each well be attached if necessary.				
Ι۷.	Is this an expansion of an existing project? yes no If yes, give the Division order number authorizing the project Narethon Oil Co. Well.					
٧.	Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.					
VI.	Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.					
ΙΙ.	• Attach data on the proposed operation, including:					
	 Proposed average and maximum daily rate and volume Whether the system is open or closed; Proposed average and maximum injection pressure; Sources and an appropriate analysis of injection flather receiving formation if other than reinjected If injection is for disposal purposes into a zone nator within one mile of the proposed well, attact the disposal zone formation water (may be measure literature, studies, nearby wells, etc.). 	uid and compatibility with produced water; and ot productive of oil or gas h a chemical analysis of				
11.	Attach appropriate geological data on the injection zone including appropriate lithologic detail, qeological name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such source known to be immediately underlying the injection interval.					
ıx.	. Describe the proposed stimulation program, if any.					
х.	 Attach appropriate logging and test data on the well. (If with the Division they need not be resubmitted.) 	well logs have been filed				
(I.	 Attach a chemical analysis of fresh water from two or more available and producing) within one mile of any injection o location of wells and dates samples were taken. 					
I.	 Applicants for disposal wells must make an affirmative statexamined available geologic and engineering data and find nor any other hydrologic connection between the disposal zon source of drinking water. 	o evidence of open faults				
I.	 Applicants must complete the "Proof of Notice" section on t 	he reverse side of this form.				
٧.	Certification					
	I hereby certify that the information submitted with this a to the best of my knowledge and belief.	pplication is true and correc				
	Name: <u>Doy C. Deem</u> Title I					
	Signature: Date:	September 27, 1984				

INJECTION WELL DATA SHELL

OPERATOR 6 WELL NO.	1		LLASC			
	6601	FSL & 660'FWL			7-S TOWNSHIP	33-E RANGE
Chave	eroo Field	. Roosevelt Coun	ty, New Mexico			
ς	<u>ichemātic</u>			Tabula	r Data	
ا ا	71111		Surface Casing			
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						y Circulate
1			Hole size			
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		n/250,2ks	Size		Cemented wi	th
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			Hole size			· ————————————————————————————————————
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			Hole size		deceiminen p	y volumetric
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that	2		Injection inter			
7h.7:			4189 (perforated or	open-hole,	4382 indicate whic	h)
A. LOM YE						
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Baker Mo	size <u>2 3/8</u> Indel AD (brand and cribe any d	05 52/+, 8" 0D line	ed with <u>Plastic</u>	(PVC Duo Li (moterial	.)	
Baker Mo	size <u>2 3/8</u> Indel AD (brand and cribe any c	OSSELT, 3" OD line J model) other casing-tubin	ed with <u>Plastic</u>	(PVC Duo Li (moterial	.)	
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