DISTRIBUTION SANTARE FILE MAG.S. LAND OFFICE OPERATOR OPERATOR		Form 0-103	FD Form	RECEIVE		<u>, </u>	1.3	OF COPIES RECEIVED	NO. 0
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P. O. Box 5544, Midland, Texas 79711 4. Location of Well A. Location of Notice, Report or Other Data Notice of Intention to: B. Manne of Notice, Report or Other Data Notice of Intention of Subsequent Report of: B. Manne of Notice, Report or Other Data A. Location of Notice, Report or Other Data Notice of Intention of Subsequent Report of: B. Manne of Notice, Report or Other Data A. Location of Notice Report or Other Data A. Location of Notice Report or Other Data A. Location of			1			The	ara	H. D. Ode	
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18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	.d. ni tting	. No liquid igned comm	690 MCFD. No	. Delivering (ke. 850# F.T.P well and a gag	1/64 duce t	s l rod	low 24 hours e plan to pr	F1 We
APPROVED BY W. A. Gussett TITLE SUPERVISOR, DISTRICT II DATE APR	. <u>11, 1977</u> PR 2 9 1977		DATE	President	I.D.Oden TITLEI	ation abov	informa (E-	ereby certify that the in	18. I her

CONDITIONS OF APPROVAL, IF ANY: