TEST WATER SHUT-OFF       PULL OR ALTER CASING       WATER SHUT-OFF         FRACTURE TREAT       MULTIPLE COMPLETE       FRACTURE TREATMENT         SHOOT OR ACIDIZE       ABANDON*       SHOOTING OR ACIDIZING         REPAIR WELL       CHANGE PLANS       (Other)	Budget Bureau No. 42-R142 5. LEASE DESIGNATION AND SERIAL NO. NM-42410 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME White Oaks Federal 9. WELL NO. 10. FIELD AND POOL, OR WILDCAT 10. FIELD AND POOL, OR WILDCAT 11. SEC., T., R./M., OR BLK. AND SUBVEY OR AREA Sec. 12: T-18-S, R-27-J 12. COUNTY OR PARISH Eddy Other Data QUENT REPORT OF: REPAIRING WELL ALTERING CASING ABANDONMENT* D CaSING KEDAIRING WELL ALTERING CASING ABANDONMENT* D CaSING KEDAIRING WELL ALTERING CASING ABANDONMENT* N CASING ABANDONMENT* N CASING ABANDONMENT X
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WOC 60 hours.	
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I hereby certify that the foregoing is true and correct	
SIGNED CARLE DESC TITLE Production Clerk	DATE4/25/85
(This space for Federal or State office use)	
APPROVED BY <b>ACCEPTED FOR RECORD</b> TITLE CONDITIONS OF APPROVAL, IF, ANY:	DATE
APR 2 9 1985 *See Instructions on Reverse Side	
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