

(OPERATOR)

(S T R)

(LEASE)

(WELL NO.)

FORM

DATE APPROVED

C-101. . . .Depth	_____
C-102. . . .Test casing.	_____
C-102. . . .Repair well	_____
C-102. . . .Deepen well	_____
C-102. . . .Shoot	_____
C-102. . . .Treat	_____
C-103. . . .Begin Drilling	_____
C-103. . . .Shoot	_____
C-103. . . .Treat	_____
C-103. . . .Test Casing	_____
C-103. . . .Deepen	_____
C-105. . . .	_____
C-110. . . .	_____

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