	,	UNI FU STATES RTMEN OF THE INT REAU OF LAND MANAGEM	BUBMIT IN TRIPLICATE. (Other instructions re ERIOR verse alde)	Expires August 6. LEASE DESIGNATION NM-56530	AND BRELAL NO.	
**t.t.       Q. \$**t.t.       or react         2. Null or ortained       505/623-1996       SEP 19'88         4. Addite or ortained       9. ***t.t.       Radice Federal         *. Addite or ortained       9. ***t.t.       8. ***t.t.         P.O. Box 2107/Roswell, NM 88202-2107       O. C. D.       1         *. ***t.t.       660' FNL & 1650' FEL Sec 8 21S 27E       10. ****t.t.*         *. ***t.t.       660' FNL & 1650' FEL Sec 8 21S 27E       11. ***********************************	(Do not use this form for p Use "APP	OTICES AND REPORT	S ON WELLS hug back to a different reservoir.			
2       Autra or oriented Manzano Oil Corporation       505/623-1996       SEP 19'88       8. Has or Loss Same Radke Federal         4. docket or oriented P.O. Box 2107/Roswell, NM 88202-2107       O. C. D.       1       1         P.O. Box 2107/Roswell, Sel is servidare with any Buter read/NEEGS OFFICE to converse or the loss of the loss				7. UHIT AGEBEMBET H		
Manzano Uli Corporation V. 505/62/1995 <ul> <li>Abstrator or prestrue</li> <li>P.O. Box 2107/Roswell, NM 88202-2107</li> <li>O. C. D.</li> <li>C. C. D. C. D.</li> <li>C. C. D. C. D.</li></ul>						
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At surface       Coolar Inits's Dories Springer         660' FNL & 1650' FEL Sec 8 21S 27E       Sec 8 721S R27E         11. service of the second	4. LOCATION OF WELL (Report local	10. FIELS AND POOL, OR WILDCAT				
660" FNL 8 1650" FEL SEC 8 215 2/E       Sec 8 7215 R27E         14.       Sec 8 7215 R27E         30-015-20877       3275" GR         14.       Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data         Sce 8 7215 R27E	8ce also space 17 below.} At surface			Cedar Hills-	-Bone Spring	
14. FRANTY BO.       16. BERTATIONS (Bloor whether Mr. Hr. etc.)       12. COUPET OF PARLIES       14. COUPET OF PARLIES       14	660' FN	11. BBC., T., R., M., GE BLE. AND BURNEY OR ABBA				
30-015-20877       3275' GR       Eddy       NM         10       Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data         Service or INTERTION TO:         Test Warts SERVERT         Service or INTERTION TO:         Test Warts SERVERT         Service or INTERTION TO:         Test Warts SERVERT         Service Test Warts Callor Autor of Notice, Report, or Other Data         Service of INTERTION TO:         Test Warts SERVICE         Service of INTERTION TO:         Test Warts SERVICE         Service of INTERTION TO:         Test Warts SERVICE         Service S		Sec 8 T21S R27E				
10-015-2087/       1       3275* CR         14       Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data         Force or infutrion to:         Test vates asofter asofter or:         Test vates asofter asofter or:         Test vates asofter asofter or:         Automation of infution contracts         asofter or infution contracts         Automation colspan="2">Automation colspan="2"         If Automation colspan="	14. PERMIT NO.	15. BLEVATIONS (Show wheth	HET BF, BT, GB, etc.)	12. COUPTY OR PARIS	E 18. STATE	
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ERGOT OB ACHIDER       AAANDON*         EFAIR VELL       CHANGE PLANE       EBOOTING OB ACHIDER AND MEETER         (Other)       CHANGE PLANE       (Other)         11. Describer remotion on completion or preservitors (Clearly state all perclines and percent remains of melitiple completion are Well Completion or Recompletion description of Recompletion description of Recompletion description of Recompletion description of Recompletion are Well Completion of Recompletion description description description description of Recompletion description descriptin description description descriptin descript	TEST WATER SHUT-OFF	PELL OR ALTER CABING	WATER BEUT-OFF		WBLL	
acrate well       CHARGE FLAKE       (Other)         17. secarate reproduce of contrasts preserves (Clearly state all pertinent details and give pertinent date. Including entinated date of starting as completions or Recompletions of Recompletions and Support and the directional date of starting as the start well.         17. secarate reproduce of contrasts preserves (Clearly state all pertinent details and give pertinent date. Including entinated date of starting as the start well.         17. secarate reproduce of contrasts preserves (Clearly state all pertinent details and give pertinent date. Including entinated date of starting as provided well.         17. secarate approval to plug and abandon this well as follows:         Set CIBP at 7200' with 35' of cement on top.         Set CIBP at 6400' with 35' of cement on top.         Cut 4-1/2" casing at approximately 4500' and pull.         Set 50' cement in and out of 9-5/8" casing 0 2600'. (100' cement).         Set 50' cement in and out of 13-3/8" casing 0 605'. (100' cement).         Set 50' plug at surface and install dry hole marker.         Restore surface as set out in regulations.         40.         41.         42.         43.       44.         44.         45.         45.         45.         46.         46.         46.         46.         46.         47. <td>FRACTORE TREAT</td> <td>NULTIPLE CONPLETE</td> <td>FRACTURE TREATMENT</td> <td>ALTERING</td> <td> PHIRAS</td>	FRACTORE TREAT	NULTIPLE CONPLETE	FRACTURE TREATMENT	ALTERING	PHIRAS	
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(This space for Federal or State office use)		• office uses				
APPROVED BY CRIG. SGD. RAJ GIRI TITLE DATE 9-16.58				DATE	-16.58	
CONDITIONS OF AFFANYLERAD AUSCURCES	CONDITIONS OF APPROVAR	AL RESOURCES	<u></u>			

## \*See Instructions on Reverse Side