18. I hereby certify that	the foregoing is true and correct	TITLE Sr. Production Clerk	55 55 50 60 60 60 60 60 60 60 60 60 60 60 60 60	RECEIVED
		0.5	25 18 53	ECEIVE
FRACTURE TREAT SILOOT OR ACIDIZE REPAIR WELL (Other) 17. DESCRIBE PROPOSED OR Proposed work. If nent to this work.)	PP PULL OR ALTER CAS MULTIPLE COMPLETE ABANDON* CHANGE PLANS COMPLETED OPERATIONS (Clearly So well is directionally drilled, give	E FEACTURE THEATMEN SHOOTING OR ACIDIZI (Other) Change	REPAIRING WELL ALTERING CASING ABANDONMENT* Operator Name results of multiple completion on Well tecompletion Report and Log form.) t dates, including estimated date of star vertical depths for all markers and zon	
3. ADDRESS OF OPERATOR P.O. BOX 2760 4. LOCATION OF WELL (H See also space 17 belo At surface	Midland, Texas 79702 Report location clearly and in accor- is 860' FNL & 1980' FE	2-2760 dance with any State requirements. EL of Unit Letter B ASS Show whether JP, RT, CK, etc.)	10. FIELD AND POOL, OR WILDCA	ca Ga BE
2. NAME OF OPERATOR Bass Enterprise	S Production Co.	RECEIVED	7. UNIT AGRESSIENT NAME Big Eddy Unit 8. FARM OR LEASE NAME Big Eddy Unit	
OIL GAB	form for proposals to drill or to d Use "APPLICATION FOR PERMI	REPORTS ON WELLS teepen or plug back to a different reservoir. Teem for such proposals.)		E NAM
(Do not use this	DRY NOTICES AND R		LC 069219	

*See Instructions on Reverse Side