Permit Dated 8-30-84 4223' GR Chaves NM	May 1963)	DEDVOLWI NMTI	IED SIAIES - ºººº Coethe inteba	Other instruct	on re	Budget Bureau No.	42-R1424.	
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PRINTER NO. It. LIEVATIONS (Show whether by F. R. OR. eds.) I2. COUNTY OF PAIRSH 13. STATE				0 0, 11 20 2				
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COther) Deepening Operations Cother Deepening Operations X	FRACTURE TREAT	<u> </u>						
Content of Description of Eventual Completion on Well Completion on Perconposition Report and Log Form.) Describe provided work. If well is directionally child, give subsurface locations and measured and true vertical depths for all markers and zones performed work. If well is directionally child, give subsurface locations and measured and true vertical depths for all markers and zones performed to this work.) 3-11-85 Total Depth - 8,246'. 3-12-85 DST #1 - 3,220' to 3,915'. Tool open 1 hr., 55 min. Recovered 1,303' dirilling mud & salt water. IHP - 3,179, IFP - 1,613, FFP - 566, ISIP - 1,396, IFP - 1,385, FFP - 1,398, FSIP - 1,411, FHP - 1,613. 3-13-85 DST #2 - 3,073' to 3,255'. Tool open 1 hr., 30 min. Recovered 539' dirilling mud. IHP - 1,599, IFP - 27, FFP - 189, ISIP - 1,183, IFP - 175, FFP - 296, FSIP - 1,156, FHP - 1,559. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. I hereby certify that the formula is true and correct signed. ACCEPTED FOR RECOMD PETER W. CHESTER DATE. MAR 25 1985	SHOOT OR ACIDIZE	ABANDO	N*					
SUBJURIES PROPOSED OR CONFILTED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.] 3-11-85 Total Depth - 8,246'. 3-12-85 DST #1 - 3,220' to 3,915'. Tool open 1 hr., 55 min. Recovered 1,303' drilling mud & salt water. IHP - 3,179, IFP - 1,613, FFP - 566, ISIP - 1,396, IFP - 1,385, FFP - 1,398, FSIP - 1,411, FHP - 1,613. 3-13-85 DST #2 - 3,073' to 3,255'. Tool open 1 hr., 30 min. Recovered 539' drilling mud. IHP - 1,599, IFP - 27, FFP - 189, ISIP - 1,183, IFP - 175, FFP - 296, FSIP - 1,156, FHP - 1,559. I hereby certify that the foregoing is true and correct signed. I hereby certify that the foregoing is true and correct signed. The first place for Friedral or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY: MAR 2 5 1985	REPAIR WELL	CHANGE	PLANS					
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APPROVED BY TITLE DATE	I hereby certify the	nat the foregoing is true a		jent	DA	те3-20-85		
APPROVED BY TITLE DATE	(This space for F	ederal or State office use)			ACCE	TED FOR RECORD		
CONDITIONS OF APPROVAL, IF ANY: MAR 25 1985	APPROVED BY _		TITLE		PETER	W. CHESTER		
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BUREAU OF LAND MANAGEMENT ROSWELL RESOURCE AREA