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To box Kills PROPOSED OR COMPLETE: OPERATIONS Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any 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.) 1. POH w/CA 2. CHC 3. Reperf Bone Springs f/8205-8482 4. Acidize 8134-8482 w/4200 gals 7-1/2% NEFE 5. Swab Test 6. Frac 8134-8482 w/142,000 gals & 282,000# sd 7. Swab/flow to clean up 8. RIH w/CA 8. I hereby certify that the foregoing is true and correct 915-688-5672 2. Acid Syab Springs form.) 915-688-5672		_	ASAN DON MENT
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DAIN VES UT	α		DATE 6-23-87
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*See Instructions on Reverse Side