	TD STATES OF THE INTERIOR vers	BMIT IN TRIPI TE• ther instructions re- e side)	Form approved. Budget Bureau No. 42-R142 LEASE DESIGNATION AND SERIAL NO.
GEOLOGICAL SURVEY			NM 0149818
(Do not use this form for proposals to Use "APPLICATION	AND REPORTS ON WI drill or to deepen or plug back to a complete for EERMIT" for such proposals.)	ELLS lifferent reservoir.	6. IF INDIAN, ALLOTTEE OR TRIBE NAM!
OIL GAS OTHER			7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	0.4		% FARM OF LEASE NAME
3. ADDRESS OF OPERATOR	pany		9. WELL NO.
4. LOCATION OF WELL (Report location clearly	JD JEKAS 19701 and in accordance with any State requ	irements.*	10. FIELD AND POOL, OR WILDCAT
At surface			VADA BOUGL C 11. SEC., T., R., M., OR ALE. AND SURVEY OR AREA 11. SEC., T., R. M., OR AREA 11
660' FNL : 1980' FEL SI	EC 8 T9 S R 35E BLEVATIONS (Show whether DF, BT, GR, etc		8 9535E NMPM
14. PERMIT NO. 15.	ELEVATIONS (Show whether DF, RT, GR, etc.	.)	12. COUNTY OR PARISH 13. STATE
16. Check Appropri	riate Box To Indicate Nature of	Nation Provides O	LEA IIVIVI
NOTICE OF INTENTION T			INT REPORT OF
FRACTURE TREAT MULTIP	LE COMPLETE FRA	TER SHUT-OFF	REPAIRING WELL ALTERING CASING
SHOOT OR ACIDIZE ABANDO REPAIR WELL CHANGE	<u> </u>	Cher)	Book ABANDONMENT*
(Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATION	S (Clearly state all pertinent details	Completion or Recomple	of multiple completion on Well tion Report and Log form.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATION proposed work. If well is directionally onent to this work.) *	frilled, give subsurface locations and n	nensured and true vertical	depths for all markers and zones pert
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	4043. CEMENTE		
_	or w/4% gel an	A 11	LASS H'W/2%
12	WN 11:30 PM K		Control of the contro
TESTED CASIN	ig to 1000# For	30 Minures	FELD O.K.
		Š	ones, in the control of the control
		10 AC	
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18. I hereby certify that the foregoing is true of	nd correct	1,	The contract of the contract o
signed YM/WAK. No	MORALITE SK. PR	DO CIEKK	DATE 10-24-68
(This space for Federal or State office use)		APPR	ALE DE STATE OF THE STATE OF TH
CONDITIONS OF APPROVAL, IF ANY:	TITLE		் இரு இ ரும் இது இரு இரு இரு இரு இரு இரு இரு இரு இரு இர
	portugal.	OCT 2	c.no.D b.m. lare b.m. lare sna .lasol mod lare i. ro otata i. ro otata
-	AC I D	8	ಕ್ರಹ್ಮ ಹ ಕ್ರಹ್ಮಕ್ಕ

*See Instructions on Reverse Side J L GORDON ACTING DISTRICT ENGINEER