SUNDRY NOTICES AND REPORTS (Do not use this form for proposals to drill or to deepen or pluse "APPLICATION FOR PERMIT_" for survive "ATTENTION OF WELL (Report location clearly and in accordance with See also space 17 below.) 4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) Suite 200/Sutton Place Bldg. Wichita, 4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) At surface 11. DOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) At surface 2100' FSL & 1980' FEL Sec. 34, T=6 14. PERMIT NO. 15. ELEVATIONS (Show whethe set also space 17 below.) At surface 2100' FSL & 1980' FEL Sec. 34, T=6 14. PERMIT NO. 15. ELEVATIONS (Show whethe set also space 17 below.) TEST WATER SHUT-OFF PULL OB ALTER CASING NOTICE OF INTENTION TO: TEST WATER SHUT-OFF P	A Substant Section 2015 Section	7. UNIT ACREEMEN 8. FARM OR LEASE Will 693 1 9. WELL NO. 5 10. FIELD AND POO Wildcat S: 11. BEC., T., R., M., SURVEY OR Sec. 34, T- 12. COUNTY OR PA ROOSEVELT r Other Data REPAIRI ALTERIN ABANDO ON 115 of multiple complet mpletion Report and Lo tes, including estimated	Ltd. Ltd. DL, OR WILDCAT an Andres , OB ELE. AND ABBA -8-S, R-35-E ING WELL NG CASING NMENT ⁰ X tion on Well g form.) 1 date of starting any
OIL X GAS OTHER 2. NAME OF OPERATOR Petroleum Production Management, Inc. 3. ADMESS OF OPERATOR Suite 200/Sutton Place Bldg. Wichita, 4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) At surface 14. PERMIT NO. 15. ELEVATIONS (Show whethe 4173.8 (Show whethe 4173.8 (Show whethe 4173.8 (Show whethe 4173.8 (Check Appropriate Box To Indicate NOTICE OF INTENTION TO: 16. Check Appropriate Box To Indicate MULTIPLE COMPLETE ABANDON ⁴ SHOOT OR ACIDIZE REAT MULTIPLE COMPLETE ABANDON ⁴ IT. DESCRIBE INDFOSED OR COMPLETED OPERATIONS (Clearly state all pert) proposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Rigged up well service unit. Dril 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water.	B-S, R-35-E r DF, RT, GR, etc.) SL e Nature of Notice, Report, or water shut-off FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>Completic</u> (Note : Report resu Completion or Reco neut details. and give pertinent dai	8. FARM OR LEASE Will 693 1 9. WELL NO. 5 10. FIELD AND POO Wildcat Si 11. BEC., T., R., M., SUZVET OR SEC. 34, T- 12. COUNTY OR FA ROOSEVELT r Other Data REPAIRI ALTERIA ALTERIA ABANDO CD 11. ST multiple complet mpletion Report and Lo	Ltd. Ltd. DL, OR WILDCAT an Andres , OB ELE. AND ABBA -8-S, R-35-E ING WELL NG CASING NMENT ⁰ X tion on Well g form.) 1 date of starting any
2. NAME OF OPERATOR Petroleum Production Management, Inc. Suite 200/Sutton Place Bldg. Wichita, 4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) At surface 2100' FSL & 1980' FEL Sec. 34, T-8 14. PERMIT NO. 15. ELEVATIONS (Show whethe 4173.8 Check Appropriate Box To Indicate NOTICE OF INTENTION TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE ABANDON* REPAIR WELL (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertiproposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Rigged up well service unit. Dril	B-S, R-35-E r DF, RT, GR, etc.) SL e Nature of Notice, Report, or water shut-off FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>Completic</u> (Note : Report resu Completion or Reco neut details. and give pertinent dai	Will 693 1 9. WELL NO. 10. FIELD AND POO Wildcat Si 11. BEC., T., R., M., SURVEY OR SEC. 34, T. 12. COUNTY OR PA ROOSEVELT r Other Data REPAIRI ALTERNA ALTERNA ALTERNA ALTERNA DO DO DO tes, including estimated	Ltd. DL, OR WILDCAT an Andres OB ELK. AND ABA -8-S, R-35-E ISBH 13. STATE N.M. ING WELL NG CASING NMENT [®] X tion on Well g form.) I date of starting any
 3. ADDESSE OF OPERATOR Suite 200/Sutton Place Bldg. Wichita, 4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) At surface 2100' FSL & 1980' FEL Sec. 34, T-8 14. PERMIT NO. 15. ELEVATIONS (Show whethe 4173.8 (Clearly State Show of a control of a	B-S, R-35-E r DF, RT, GR, etc.) SL e Nature of Notice, Report, or water shut-off FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>Completic</u> (Note : Report resu Completion or Reco neut details. and give pertinent dai	9. WELL NO. 5 10. FIELD AND POO Wildcat Sa 11. BEC., T., R., M., SURVEY OF Sec. 34, T- 12. COUNTY OF PA ROOSEVELT r Other Data REPAIR ALTERIA ABANDO ON 115 of multiple completion Report and Lo tes, including estimated	DL, OR WILDCAT an Andres , OB BLK. AND AREA -8-S, R-35-E ISISH 13. STATE N.M. ING WELL NG CASING NMENT [•] X tion on Well g form.) I date of starting any
Suite 200/Sutton Place Bldg. Wichita 4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) At surface 2100' FSL & 1980' FEL Sec. 34, T-8 14. PERMIT NO. 15. ELEVATIONS (Show whethe 4173.8 (C 16. Check Appropriate Box To Indicate NOTICE OF INTENTION TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all perti- proposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Rigged up well service unit. Dril 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814' 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water.	B-S, R-35-E r DF, RT, GR, etc.) SL e Nature of Notice, Report, or water shut-off FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>Completic</u> (Note : Report resu Completion or Reco neut details. and give pertinent dai	5 10. FIELD AND POC Wildcat So 11. BEC., T., R., M., SURVEY OR Sec. 34, T- 12. COUNTY OR PA ROOSEVELT r Other Data REQUENT REPORT OF: REPAIRS ALTERIA ABANDO ON 115 of multiple completion Report and Lo tes, including estimated	an Andres , of ELE. AND ABBA -8-S, R-35-E ISBE 13. STATE N.M. ING WELL NG CASING NMENT [®] X tion on Well g form.) I date of starting any
 4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) At surface 2100' FSL & 1980' FEL Sec. 34, T-8 14. PERMIT NO. 15. ELEVATIONS (Show whethe 4173.8 (Mathematical Action of the second of the	B-S, R-35-E r DF, RT, GR, etc.) SL e Nature of Notice, Report, or water shut-off FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>Completic</u> (Note : Report resu Completion or Reco neut details. and give pertinent dai	10. FIELD AND POC Wildcat Sa 11. BEC., T., R., M., SUBVEY OF Sec. 34, T- 12. COUNTY OF PA ROOSEVELT r Other Data BEQUENT REPORT OF: BEPAIRI ALTERIA ABANDO ON 201 21ts of multiple completion Report and Lo tes, including estimated	an Andres , of ELE. AND ABBA -8-S, R-35-E ISBE 13. STATE N.M. ING WELL NG CASING NMENT [®] X tion on Well g form.) I date of starting any
At surface 2100' FSL & 1980' FEL Sec. 34, T-8 14. PERMIT NO. 15. ELEVATIONS (Show whethe 4173.8 (C 16. Check Appropriate Box To Indicate NOTICE OF INTENTION TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE ABANDON* (Other) PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS 17. DESCRIBE INFOROSED OR COMPLETED OPERATIONS (Clearly state all pert) proposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Rigged up well service unit. Dril 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814' 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water.	r DF, RT, GR, etc.) SL 2 Nature of Notice, Report, or SUBS WATEE SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>COmpletic</u> (NOTE : Report resu Completion or Reco neut details. and give pertinent data	11. SEC., T., R., M., SURVEY OR Sec. 34, T- 12. COUNTY OR PA ROOSEVELT r Other Data SEQUENT REPORT OF: REPAIRS ALTERIA ABANDO ON Lits of multiple completion Report and Lo tes, including estimated	OB BLE. AND ABA -8-S, R-35-E ISH 13. STATE N.M. ING WELL NG CASING NMENT [®] X tion on Well g form.) I date of starting any
14. PERMIT NO. 15. ELEVATIONS (Show whethe 4173.8 (173	r DF, RT, GR, etc.) SL 2 Nature of Notice, Report, or SUBS WATEE SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>COmpletic</u> (NOTE : Report resu Completion or Reco neut details. and give pertinent data	SURVEY OR Sec. 34, T- 12. COUNTY OR PA ROOSEVELT r Other Data REQUENT REPORT OF: REPAIRS ALTERIA ABANDO ON Dilts of multiple completion Report and Lo tes, including estimated	ABBA -8-S, R-35-E III II. STATE N.M. ING WELL NG CASING NMENT [•] X tion on Well g form.) I date of starting any
4173.8 16. Check Appropriate Box To Indicate NOTICE OF INTENTION TO: TEST WATER SHUT-OFF FRACTURE TREAT PULL OB ALTER CASING SHOOT OR ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS (Other) CHANGE PLANS 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertiments to this work.)* 4-3-91Rigged up well service unit. Drill 4-3-91Rigged up well service unit. Drill 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814' 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water.	E Nature of Notice, Report, or SUBS WATEE SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>Completic</u> (NOTE: Report resu Completion or Recon neut details, and give pertinent dat	12. COUNTY OF PA ROOSEVELT r Other Data REQUENT REPORT OF: REPAIRI ALTERIA ALT	ING WELL NG CASING NMENT [®] tion on Well g form.) I date of starting any
4173.8 16. Check Appropriate Box To Indicate NOTICE OF INTENTION TO: TEST WATER SHUT-OFF FRACTURE TREAT PULL OB ALTER CASING SHOOT OR ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS (Other) CHANGE PLANS 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertiments to this work.)* 4-3-91Rigged up well service unit. Drill 4-3-91Rigged up well service unit. Drill 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814' 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water.	E Nature of Notice, Report, or SUBS WATEE SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>Completic</u> (NOTE: Report resu Completion or Recon neut details, and give pertinent dat	ROOSEVELT r Other Data REQUENT REPORT OF: REPAIRI ALTERIM ABANDO ON alts of multiple completion Report and Lo tes, including estimated	N.M. ING WELL NG CASING NMENT [•] X tion on Well g form.) 1 date of starting any
16. Check Appropriate Box To Indicate NOTICE OF INTENTION TO: TEST WATER SHUT-OFF PULL OR ALTER CASING FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON*	P Nature of Notice, Report, or BUBS WATEE SHUT-OFF FRACTURE TREATMENT SHOOTING ON ACIDIZING (Other) <u>Completion</u> (NOTE: Report resu Completion or Recor- neut details, and give pertinent dat	r Other Data EQUENT REPORT OF: REPAIRI ALTERIA ALTERIA ABANDO ON alts of multiple completion Report and Lo tes, including estimated	ING WELL NG CASING NMENT [•] X tion on Well g form.) 1 date of starting any
NOTICE OF INTENTION TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all perti- proposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Rigged up well service unit. Dril 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814' 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water.	SUBS WATEE SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>COmpletic</u> (NOTE: Report resu Completion or Reco neut details, and give pertinent data	REQUENT REPORT OF: REPAIR ALTERIA ABANDO ON ABANDO ON Lits of multiple completion Report and Lo tes, including estimated	NG CASING NMENT* tion on Well og form.) I date of starting any
TEST WATER SHUT-OFF PULL OF ALTER CASING FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS (Other) Change Plans 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertiproposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Rigged up well service unit. Drill 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814' 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water.	WATEE SHUT-OFF FRACTURE TREATMENT SHOOTING ON ACIDIZING (Other) <u>Completic</u> (NOTE: Report resu Completion or Reco neut details, and give pertinent dat	REPAIRI ALTERII ABANDO ON alts of multiple complet mpletion Report and Lo tes, including estimated	NG CASING
FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all perti- proposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Rigged up well service unit. Dril 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814' 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water.	FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <u>COmpletic</u> (Note: Report rest Completion or Reco neut details, and give pertinent dat	ALTERII ABANDO ON lits of multiple complet mpletion Report and Lo tes, including estimated	NG CASING
SHOOT OR ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertiproposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Rigged up well service unit. Drill 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814' 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water.	SHOOTING ON ACIDIZING (Other) <u>Completic</u> (NOTE: Report resu Completion or Recon neut details, and give pertinent data	ABANDO ON alts of multiple complet mpletion Report and Lo tes, including estimated	INMENT [•] tion on Well g form.) 1 date of starting any
REPAIR WELL CHANGE PLANS (Other) (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertiproposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Rigged up well service unit. Drill 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water.	(Other) <u>Completic</u> (Norx: Report resu Completion or Reco neut details, and give pertinent dat	ON lits of multiple complet mpletion Report and Lo tes, including estimated	tion on Well og form.) I date of starting any
(Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all perti- proposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Rigged up well service unit. Dril 4-4-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814' 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water.	(NOTE: Report resu Completion or Reconnection data (Note: Report results), and give pertinent data (Note: Report results), and	ilts of multiple complet mpletion Report and Lo tes, including estimated	tion on Well og form.) I date of starting any
<pre>proposed work. If well is directionally drilled, give subsurface nent to this work.)* 4-3-91Ran CN/GR/CCL logs from 4865' to 4 gallons of 20% MCA acid from 4814 4-5-91Swabbed back load (53 barrels) plu 4-6-91Swabbed 150 barrels of salt water. 4-7-91Swabbed 150 barrels of salt water.</pre>	nent details, and give pertinent dat	tes, including estimated	date of starting any
4-9-91Perforated and acidized with 1000 4-10-91Swabbed 100% salt water. 4-11-91Swabbed 100% salt water. 4-12-91Righed down well service unit. Ex U U U U U U U U U U U U U U U U U U U	500'. Perforated and -4822'. Is 150 barrels salt wat 800'. gallons of 20% NE/FE a	acidized with ter.	
18. I hereby certify that the foregoing is true and correct SIGNED	District Superintenden	PFTER W. (-12-91 CHESTER 1991

BURFALLOF LAND MANAGENES -L