N M	0. C. C. COP	Section	Township	l tarmen	
		3	8	Hando	
GEOLOC AL SURVEY			Ci ocation of Well:	31	
WELL STATUS R	EPORT	<b>6</b> 50		-	
(To be submitted in quintuplicate on all inactive wells)			feet from	North	line
NAME AND ADDRESS OF OPERATOR			feet from	West	line
Sundance Ois Company, Drawer I, Artes	is, N.H. 38210	Pool			
WELL NO. AND LEASE NAME LEASE NO.			<u>i Ton, Sai</u>	BTATE	<u>े हैं ।</u>
Oakaeson Federal #1	NA .50.5-A	Chave	<b>s</b>	<u>N14</u>	
1. When Was Well Shut-in or Last Produced?					
2. Type Well		<u>_</u>	<u> </u>		
0il Well Gas Well X Ten	np. Abd. Well				_
3. Producing Capability			·		<u> </u>
BOPD	MCFGPD	<u> </u>			
BWPD	Date Last Tested				
4. Is Well Considered Capable of Production in	Paying Quantities?				
		Yes	X No		
5. If Capable of Producing in Paying Quantitie	s, Give Reasons For Not	Producin	g Well.	· · ·	
			Ç.		
· · · · · · · · · · · · · · · · · · ·					
<ol> <li>If Not Capable of Producing in Paying Quantities, Give Reasons For Not Plugging Well At This Time.</li> </ol>					
· · ·					
		4			
	,				
			NED		
7. What Are Future Plans For Operating Well (I	nclude Estimated Dates) س	? RE	CEL		
Well is not productive, plan to 1	aj and abandon	Kr	10/j	pa.	
as soon as possible.			NAY 2 CT	ر م	
			A RECEIPTION	•	
		1	A Company of the second		
I hereby certify that the foregoing is true and correct					
SIGNED W. M. Magan TITLE S	J_it.	DATE	5-3-76		
(This space for Federal or State office use)					
APPROVER TO TITLE		DATE			
H					
HI Barran					
ACTING DISTORT	•				
ACCOMMENTED ACCOMMENTE ACCOMMENTED ACCOMMENTEDA ACCOMMENTEDA ACCOMMENT					

