ANTICE OF INTENTION TO.  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  CHARLES SALES AND SALES H. W. A. Comment of Sales Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  CHARLES SALES AND SALES H. W. A. Comment of Sales Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  CHARLES SALES AND SALES H. W. A. Comment of Sales Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  CHARLES SALES AND SALES H. W. A. Comment of Sales Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  CHARLES SALES AND SALES H. W. A. Comment of Sales Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO.  CHARLES SALES AND SALES H. W. A. Comment of Sales Appropriate Box To Indicate Nature of Notice, Report or Other Data Notice of Sales Appropriate Data Notice Office Of	NO. OF COPIES RECEIVED				Form C-103	1	
NEW MEXICO DIL CONSERVATION COMMISSION    Constructive   Construct	DISTRIBUTION						
SUBSECUENT   SUNDRY NOTICES AND REPORTS ON WELLS   SUSTEMBLY SUBSECUENT   SUNDRY NOTICES   SUNDRY NOTICES   SUBSECUENT							
LAND OFFICE OPERATOR  SUMPLY NOTICES AND REPORTS ON NELLS  OR NOT THE THIS TOWN AND LAND OFFICE SAND REPORTS ON NELLS  OR NOTICE OF THE THIS TOWN AND LAND OFFICE SAND REPORTS ON NELLS  OFFICE OFFICE OPERATOR  SUMPLY NOTICES AND REPORTS ON NELLS  OFFICE OFFICE OFFICE OPERATOR  PARTICLE OPERATOR  PARTICLE OFFICE OPERATOR  PARTICLE OPERATOR  PA		NEW MEXIC	O OIL CONS	ER VALION COMMISSION	Fliedilve 1	-1-65	
SUBSTITUTE					Sa. Indicate Ty	me of Lease	
SUNDRY NOTICES AND REPORTS ON WELLS  BOO NOT USE THIS FORM FOR PROPERTY OF WELLS  BOO NOT USE THIS FORM FOR PROPERTY OF BOO NOTICES AND REPORTS ON WELLS.  BOO NOT USE THIS FORM FOR PROPERTY OF BOO NOTICES AND REPORTS ON WELLS.  BOO NOTICE OF THE PROPERTY		1			\		
SUNDRY NOTICES AND REPORTS ON WELLS  TO HAVE THE FORMAL ACCORDING THE PROPERTY OF THE STATE STATE STATE ACCORDING TO THE STATE ACCORDING							
The Composition of Internal Development Among Production Company  1. Advance of Operator  ADNOOD Production Company  1. Advance of Operator  BOX 88, HOBBS, N. M. 88240  4. Location of Well  1. Line, SECTION 19 TOWNSHIP, 5-5 NASE 33-E NATION  THE EBST LINE, SECTION 19 TOWNSHIP, 5-5 NASE 33-E NATION  THE EBST LINE, SECTION 19 TOWNSHIP, 5-5 NASE 33-E NATION  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  CHAPTER TOWNSHIP TO	OPERATOR				5. State Oil &	Gas Lease No.	
The Composition of Internal Development Among Production Company  1. Advance of Operator  ADNOOD Production Company  1. Advance of Operator  BOX 88, HOBBS, N. M. 88240  4. Location of Well  1. Line, SECTION 19 TOWNSHIP, 5-5 NASE 33-E NATION  THE EBST LINE, SECTION 19 TOWNSHIP, 5-5 NASE 33-E NATION  THE EBST LINE, SECTION 19 TOWNSHIP, 5-5 NASE 33-E NATION  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  CHAPTER TOWNSHIP TO					- trimin	·····	
AMOCO Production Company  7. Address of Cherester  BOX 68, HOBSIS, N. M. 88240  4. Location of Walt  1650 rect from the SOUTH line and 1980 rect from the SOUTH line and 1980 rect from the DPS SIGNIFED  10. Flowering Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  FEURO AND ABANDON  PULIS ABANDON  PULIS AND ABANDON  PULIS ABANDON  PULIS AND ABANDON  PULIS AND ABANDON  PULIS ABANDON  PULIS ABANDON  PULIS AND ABANDON  PULIS ABANDON  PULIS AND ABANDON	SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  USE "*APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)						
Affined Production Company  1. Address of Specified BOX 68, HOBBS, N. M. 88240  4. Location of West  1. I650 ret from the SOUTH Line and 1980 ret from the Pool, of Villett  1. PSSIGNATE D  1. County  1. EBST Line, section 19 rounds: 5-5 rame 33-E NAPAN  1. County  1. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  1. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  1. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  1. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  1. Check Appropriate Committee Check Department of Subsequent REPORT OF:  1. Check Appropriate Check Appropriate Committee Check Department of Charles and County of Subsequent Report of Check Department of Charles and Check Department of Check Department of Charles and Check Department of Check Department of Charles and Check Department of Check D	OIL GAS	OTHER. DPI	LING		7. Unit Agreen	ient Name	
S. Add House of Control of Well  1. Lec mitten of Real Mellon  1. Lec mite	2. Name of Operator						
BOX 68, HOBBS, N. M. 88240  4. LOSTIDION OF WEIT  10. Freel and Pool, or Wildows  11. Freel and Pool, or Wildows  12. Country  13. Elevation (Show whether DF, RT. (R. etc.).  4416 R. D. B.  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK  TELEPORAFILY ABANDON  THE PROPOSED FLANGE PLANG CASING  PALL OF ALTER CASING  CHARGE PLANG  CASHING CHARGE  CHARGE PLANG  CHARGE PLANG  CASHING CHARGE  CHARGE PLANG  CASHING CHARGE  CHARGE PLANG  CASHING CHARGE  CASHING CHARGE  CHARGE PLANG  CASHING CHARGE  CHARGE PLANG  CASHING CHARGE  CASHING CHARGE  CHARGE PLANG  CASHING CHARGE  CHARGE PLANG  CASHING CHARGE  CASHING CHARGE  CHARGE PLANG  CASHING CHARGE  CASHING CHARGE  CASHING CHARGE  CHARGE PLANG  CASHING CHARGE  CASHING CHARGE  CASHING CHARGE  CASHING CHARGE  CASHING CHARGE  CASHING CHARGE  CASHIN		ally		·	SULFICI	SVEFICITIES I	
UNIT VETTER JETT 1650 FEET FROM THE SOUTH LINE AND 1980 FEET FROM UP DESIGNATED THE EAST LINE, SECTION 19 YOWESHIP 5-S RANGE 33-E NAME AND SECTION 19 TOWNSHIP 5-S RANGE 33-E NAME AND SECTION 19 TOWNSHIP 5-S RANGE TO RELIED TO THE PORT OF:  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  PEGETORN BEHEDIAL WORK SUBSEQUENT REPORT OF:  PEUG AND ALTER LAWING SUBSEQUENT REPORT OF:  POLIC AND ALTER LAWING SUBSEQUENT REPORT OF:  CAMBE FLANS SUBSEQUENT REPORT OF:  CAMBE FLANS OF S						,	
15. Elevation (Show wheeler DF, RT, CR, sec.)  16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  17. Departure Advances  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  18. Check Indicate Nature of Notice Report of Notice Report of Nature of Notice Report of Notice Report of Notice Report of Notice Report of Nature of Notice Report of Nature of		^ = -		1000	10. Field and	10. Field and Pool, or Wildcat	
15. Elevation (Show whether DF, RT, GR, etc.)  A416 R. D. B.  ROSEWELT  ROSEWELT  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK  TEMPERABLIVA ABANDON  TEMPERABLIVA ABANDON  PULL ON ALTER CASING  OTHER  17. DOCUMENT COMMENCE OF Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated Que of staring any proposed was pet @ 8075 W/470 Sx CLASS H W/3/4 of 1% CFR-2.  WOOL TON Appl. 48 Roms. Jestel Casing  W 2000 PS; for 30 min. Just O.K.  Commenced Completed Completed Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated Que of staring any proposed was pet @ 8075 W/470 Sx CLASS H W/3/4 of 1% CFR-2.  WOOL TON Appl. 48 Roms. Jestel Casing  W 2000 PS; for 30 min. Just O.K.  Commenced Completed Completed Complete to the best of my knowledge and belief.  THE AREA SUPERINTENDENT  DATE FEB 24 1972  ON 2. NIMOCCH  OTHER  OF Signed by  APPROVED BY STREES (ALT)  ON 1. NIMOCCH  OTHER  OTHER  COMMENCE OF THE CASING  ALTERING CASING  COMMENCE OF THE COMMENCE	UNIT LETTER,	550 FEET FROM THE	SOUTH	LINE AND FE	ET FROM UNDES!	GNATE D	
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PULL OR ALTERING CASING OTHER  17. Describe Proposed of Completed Operations (Clearly state all pertnernt details, and give pertnernt dates, including estimated for starting any proposed was set of the complete of the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I	THE <b>EAST</b> LINE, SECTION	on <u>19</u> towns	<sub>энір</sub> <u>5-</u> 5	RANGE 33-E	_ NMPM.		
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PULL OR ALTERING CASING OTHER  17. Describe Proposed of Completed Operations (Clearly state all pertnernt details, and give pertnernt dates, including estimated for starting any proposed was set of the complete of the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shove is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information shows it is true and complete to the best of my knowledge and belief.  18. I		15. Elevation	(Show whether	OF, RT, GR. etc.)	12. County	<del></del>	
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON PULL OR ALTER CASING  OTHER  17. Describe Personal Crash Completed Operations (Clearly state all pertinent details, and give persinvent dates, including estimated date of starting any proposed works SEE RULE 1103.  OTHER  17. Describe Personal Crash Completed Operations (Clearly state all pertinent details, and give persinvent dates, including estimated date of starting any proposed works SEE RULE 1103.  OTHER  17. Describe Personal Crash Completed Operations (Clearly state all pertinent details, and give persinvent dates, including estimated date of starting any proposed works SEE RULE 1103.  OTHER  17. Describe Personal Completed Operations (Clearly state all pertinent details, and give persinvent dates, including estimated date of starting any proposed works SEE RULE 1103.  OTHER  17. Describe Personal Completed Operations (Clearly state all pertinent details, and give persinvent dates, including estimated date of starting any proposed others.  OTHER  17. Describe Personal Completed Operations (Clearly state all pertinent details, and give persinvent dates, including estimated date of starting any proposed others.  OTHER  17. Describe Personal Completed Operations (Clearly state all pertinent details, and give persinvent dates, including estimated date of starting any proposed others.  OTHER  17. Describe Personal Complete Operations (Clearly state all personal complete to the best of my knowledge and belief.  18. I hereby certify that the Inference of Starting any proposed others.  18. I hereby certify that the Inference of Starting any proposed others.  18. I hereby certify that the Inference of Starting any proposed others.  18. I hereby certify that the Inference of Starting any proposed others.  18. I hereby certify that the Inference of Starting any proposed others.  18. I hereby certify that the Inference of Starting any proposed others.  18. I hereby certify that th					2	- (1111111)	
NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  PERFORM REMEDIAL WORK  TEMPORATILY ABANDON  OTHER  OTHER  17. Describe Proposed or Completed Operations (Clearly state all pertinent deatils, and give pertinent dates, including estimated spee of starting any proposed work) see RULE 1103.  OTHER  OTHER  17. Describe Proposed or Completed Operations (Clearly state all pertinent deatils, and give pertinent dates, including estimated spee of starting any proposed work) see RULE 1103.  OTHER  17. Describe Proposed or Completed Operations (Clearly state all pertinent deatils, and give pertinent dates, including estimated spee of starting any proposed work) see RULE 1103.  OTHER  17. Describe Proposed or Completed Operations (Clearly state all pertinent deatils, and give pertinent dates, including estimated spee of starting any proposed work of the Value of Starting any proposed of Complete Starting and Starting a		, , , , , , , , , , , , , , , , , , ,					
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING  CHANGE PLANS  CHANGE PLANS  CHANGE PLANS  COMMERCE DRILLING OPINS.  CASING TEST AND CEMENT JOB  OTHER  17. Describe Proposed or Completed Operations (Clearly state all perinant details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.  ON 2-14-72, 516" OD 14-17" J-55 ** K-55 CASING WAS DEL @ 8075" W470 Sx CLASS H W 344 Of 1% CFR-2.  UNOC JON CAPPY. 48 hours. Jested Cas ing W 2006 PS; John 30 min. Ilst O.K.  Commission of the complete of the best of my knowledge and belief.  18. Thereby certify that the information above is true and complete to the best of my knowledge and belief.  18. Thereby certify that the information above is true and complete to the best of my knowledge and belief.  18. Thereby certify that the information above is true and complete to the best of my knowledge and belief.  18. Thereby certify that the information above is true and complete to the best of my knowledge and belief.  18. Thereby certify that the information above is true and complete to the best of my knowledge and belief.  18. Thereby certify that the information above is true and complete to the best of my knowledge and belief.  18. Thereby certify that the information above is true and complete to the best of my knowledge and belief.  18. Thereby certify that the information above is true and complete to the best of my knowledge and belief.  20. Thin CC-H  10. Delta September 10. Delta FEB 2.4 1972  21. Delta September 20. Delta FEB 2.8 1972			Indicate N	•			
TEMPORARILY ABANDON PULL DA ALTER CASING  CHANGE PLANS  CH	NOTICE OF IN	ITENTION TO:		SUBSE	QUENT REPORT O	F:	
TEMPORARILY ABANDON PULL DA ALTER CASING  CHANGE PLANS  CH				1	<del></del> 1		
PULL OR ALTER CASING OTHER  OTHER  17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.  ON 2-11-72, 512" OD 14-17" J-55; K-55 Cassing was set @ 8075" w/470 Sx CLASS H w/3/4 of 1% CFR-2.  2000 Jon Appyl. 48 hours. Jested cas ing w/2000 ps, for 30 min. Jest O.K.  Commission Commission Complete to the best of my knowledge and belief.  18. I hereby certify that the Information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information above is true and complete to the best of my knowledge and belief.  2000 OTHER	PERFORM REMEDIAL WORK	PLUG AND	ABANDON	REMEDIAL WORK	ALT	ERING CASING	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated spic of starting any proposed work) see Rule 1103.  On R-1+72, 5% OD 14-17# J-55 * K-55 Casing was pet @ 8075 * W470 Sx Class H w/3/4 of 1% CFR-2.  WOOC for appl. 48 hours. Jested casing wy 2000 ps, for 30 min. Just O.K., comminced complete to the best of my knowledge and belief.  18. I hereby certify that the Information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the Information above is true and complete to the best of my knowledge and belief.  20. I NIMOCC-H  1. Div Orig. Signed by JULE APPROVED THE APPROVED ATTER TO BE THE B 2 3 1972	TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.	PLU	G AND ABANDONMENT	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.  On 2-11-72, 516" OD 14-17" J-55 ! K-55 Casing was pet @ 8075" w/470 Sx Class H w/3/4 of 1% CFR-2.  UOC for appl. 48 hours. Jested Casing w/2000 ps, for 30 min. Just O.K.  Commissional Completed Complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  20. I have been above in true and complete to the best of my knowledge and belief.  21. I have been above in true and complete to the best of my knowledge and belief.  22. I have been above in true and complete to the best of my knowledge and belief.  23. I have been above in true and complete to the best of my knowledge and belief.  24. I have been above in true and complete to the best of my knowledge and belief.  25. I have been above in true and complete to the best of my knowledge and belief.  26. I have been above in true and complete to the best of my knowledge and belief.  27. I have been above in true and complete to the best of my knowledge and belief.  28. I have been above in true and complete to the best of my knowled	PULL OR ALTER CASING	CHANGE P	LANS	CASING TEST AND CEMENT JOB	X	_	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  28. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  29. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  29. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  29. I hereby certify that the information above is true and comple				OTHER			
On 2-11-72, 5½ OD 14-17# J-55 ! K-55 Casing was set @ 8075	OTHER		LJ				
On 2-11-72, 5½ OD 14-17# J-55 ! K-55 Casing was set @ 8075	17. Describe Proposed or Completed Op	perations (Clearly state al	l pertinent deta	ils, and give pertinent dates, in	ncluding estimated date of	of starting any proposed	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  20. I NIMOCC-H  1. Day  Orig. Signed by  APPROVED BY  Orig. Signed by  APPROVED BY  ONTO THE PERSON LIF ANYL. Die D. Ramey  CONDITIONS OF APPROVED LIF ANYL. DIE J. S. C.	work) SEE RULE 1103.			سأفرد فيستو		, , , , ,	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  20. I NIMOCC-H  1. Day  Orig. Signed by  APPROVED BY  Orig. Signed by  APPROVED BY  ONTO THE PERSON LIF ANYL. Die D. Ramey  CONDITIONS OF APPROVED LIF ANYL. DIE J. S. C.	Chr. 2-11-72	5%"のり ん	1-17#	J-55 & K- 5	5 Casin	G	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  20. I NIMOCC-H  1. Day  Orig. Signed by  APPROVED BY  Orig. Signed by  APPROVED BY  ONTO THE PERSON LIF ANYL. Die D. Ramey  CONDITIONS OF APPROVED LIF ANYL. DIE J. S. C.				2,000 11 141 314	1 101 01	Cn 2	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  20. I NIMOCC-H  1. Day  Orig. Signed by  APPROVED BY  Orig. Signed by  APPROVED BY  ONTO THE PERSON LIF ANYL. Die D. Ramey  CONDITIONS OF APPROVED LIF ANYL. DIE J. S. C.	was set @ E	3075 <i>4/47</i>		2ASS H W/3/4	0/ 1/0 61	r K-K.	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNED  AREA SUPERINTENDENT  DATE FEB 2 4 1972  Orig. Signed by  I-PHILLIPS - ODES 9  CONDITIONS OF APPROVAL IF ANYL. THE SUPERIOR OF THE SUPERI	7/100 100	101 18	Enus	1 Tentod	Pan in		
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNED  AREA SUPERINTENDENT  DATE FEB 2 4 1972  Orig. Signed by  I-PHILLIPS - ODES 9  CONDITIONS OF APPROVAL IF ANYL. THE SUPERIOR OF THE SUPERI	wood for a	pp4. 40		s. Jestes		Y	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNED  AREA SUPERINTENDENT  DATE FEB 2 4 1972  Orig. Signed by  I-PHILLIPS - ODES 9  CONDITIONS OF APPROVAL IF ANYL. THE SUPERIOR OF THE SUPERI	W/2000 PS, F	02 30 m	am.	Jest O.K		•	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNED  AREA SUPERINTENDENT  DATE FEB 2 4 1972  Orig. Signed by  I-PHILLIPS - ODES 9  CONDITIONS OF APPROVAL IF ANYL. THE SUPERIOR OF THE SUPERI	America de la constante de la	A man m	and the	1. Onina	tions		
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNED  AREA SUPERINTENDENT  DATE FEB 2 4 1972  Orig. Signed by  I-PHILLIPS - ODES 9  CONDITIONS OF APPROVAL IF ANYL. THE SUPERIOR OF THE SUPERI	Communica	, corregs x	CEIIO	c officer	<i>71010</i> .		
ON 2- NIMOCC-H  1- DIV  Orig. Signed by  APPROVED BY  1- MILLIPS-ODESSA  1- MILLIPS-ODESSA  FEB 24 1972  DATE FEB 2 3 1972				·			
ON 2- NIMOCC-H  1- DIV  Orig. Signed by  APPROVED BY  1- MILLIPS-ODESSA  1- MILLIPS-ODESSA  FEB 24 1972  DATE FEB 2 3 1972							
ON 2- NIMOCC-H  1- DIV  Orig. Signed by  APPROVED BY  1- MILLIPS-ODESSA  1- MILLIPS-ODESSA  FEB 24 1972  DATE FEB 2 3 1972							
ON 2- NIMOCC-H  1- DIV  Orig. Signed by  APPROVED BY  1- MILLIPS-ODESSA  1- MILLIPS-ODESSA  FEB 24 1972  DATE FEB 2 3 1972							
ON 2- NIMOCC-H  1- DIV  Orig. Signed by  APPROVED BY  1- MILLIPS-ODESSA  1- MILLIPS-ODESSA  FEB 24 1972  DATE FEB 2 3 1972	¥						
ON 2- NIMOCC-H  1- DIV  Orig. Signed by  APPROVED BY  1- MILLIPS-ODESSA  1- MILLIPS-ODESSA  FEB 24 1972  DATE FEB 2 3 1972			•				
ON 2- NIMOCC-H  1- DIV  Orig. Signed by  APPROVED BY  1- MILLIPS-ODESSA  1- MILLIPS-ODESSA  FEB 24 1972  DATE FEB 2 3 1972							
ON 2- NIMOCC-H  1- DIV  Orig. Signed by  APPROVED BY  1- MILLIPS-ODESSA  1- MILLIPS-ODESSA  FEB 24 1972  DATE FEB 2 3 1972							
ON 2- NIMOCC-H  1- DIV  Orig. Signed by  APPROVED BY  1- MILLIPS-ODESSA  1- MILLIPS-ODESSA  FEB 24 1972  DATE FEB 2 3 1972							
ON 2- NIMOCC-H  1- DIV  Orig. Signed by  APPROVED BY  1- MILLIPS-ODESSA  1- MILLIPS-ODESSA  FEB 24 1972  DATE FEB 2 3 1972							
ON 2- NIMOCC-H  1- DIV  Orig. Signed by APPROVED BY 1- MILLIPS-ODESSA 1- MILLIPS-ODE		,					
ON 2- NIMOCC-H  1- DIV  Orig. Signed by APPROVED BY 1- MILLIPS-ODESSA 1- MILLIPS-ODE							
Orig. Signed by  APPROVED BY  I. DIV  Orig. Signed by  APPROVED BY  JOE D. Ramey  CONDITIONS OF APPROVAL IF ANY!  Dist. J. S.	18. I hereby certify that the information	above is true and complet	te to the best o	f my knowledge and belief.			
Orig. Signed by  APPROVED BY  I. DIV  Orig. Signed by  APPROVED BY  JOE D. Ramey  CONDITIONS OF APPROVAL IF ANY!  Dist. J. S.							
Orig. Signed by  APPROVED BY  I. DIV  Orig. Signed by  APPROVED BY  JOE D. Ramey  CONDITIONS OF APPROVAL IF ANY!  Dist. J. S.		9	ARE	SUPERINTENDENT	250	2 4 1972	
1- Div Orig. Signed by  APPROVED BY  I- MILLIPS - ODESSA. IF ANY: Dies J. S.	SIGNED		TITLE	(1FI JOP14)	DATE FED	4 4 WIF	
1- Div Orig. Signed by  APPROVED BY  I- MILLIPS - ODESSA. IF ANY: Dies J. S.	Of 2-NMOCC-H						
APPROVED BY  I- PHILLIPS - ODESCA  CONDITIONS OF APPROVAL IF ANY: The T.C.	1. Div	Orig. Signed by			r r	P 28 1072	
CONDITIONS OF APPROVAL, IF ANY: The T C.	APPROVED BY		TITLE		DATE T	D 60 13/C	
	CONDITIONS OF APPROVAL, IF ANY			•			

1- REY