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3. ADDRESS OF OPERATOR P.O. BOX 552, 1. LOCATION OF WELL (Report location See also space 17 below.)	Midland. Texas			
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4. LOCATION OF WELL (Report location See also space 17 below.)	Midland, Texas			9. WELLENO. HERE TO NO GO GO
See also space 17 below.)	P.O. Box 552, Midland, Texas 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			
At surface	cientif and in accordance	e with any State requiren	nents.*	10. FIELD AND FOOD, OR WILDCA
				Lea Devonian
440 PCT ===== 110	90 ETT			11. SEC. T., B., M., OE BLE: AND
660 FSL and 19	OU FWL			
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)			Sec . 12, T-205 - R-341	
		GR 3653.7		1 = 4 2 5 5 5 5 5
16. <i>C</i> L1. A			- 	New 1
Check A	appropriate Box To In	idicate Nature of No	otice, Report, or C	Other Data # 18 2 2 2
NOTICE OF INT	NTION TO:		SUBSEQU	URNT REPORT OF
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER	SHUT-OFF	THE SEREPAREMONIAL T
PRACTURE TREAT	MULTIPLE COMPLETE	FRACTI	THE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	TOORS	ING OR ACIDIZING	ABANDONMENT
REPAIR WELL	CHANGE PLANS	(Other		
(Other) 17. DESCRIBE PROPOSED OR COMPLETED OF proposed work. If well is direct nent to this work.)*		c	Completion or Recompl	of multiple completion on Well letton Report and Log form.
It is planned to s to squeeze off the	casing leak.	This work is s	cheduled to	belian to good and the glad to another another and the glad to another and the glad to a proper and the glad to a proper and to a proper and to a proper another all to a proper another and to a proper another and to a proper another anoth
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		ROSWELL, NEW MEXI	CO	불위학문의 등의 종생들은
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8. I hereby certify that the foregoing	s true and correct			
8. I hereby certify that the foregoing signed		TLE PRODUCTION	, ENGR	DATE 8-/6-82
SIGNED IL litter	TIT	NE PRODUCTION	, ENGR	DATE 8-/6-82
W. William	CWED TIT	TLE PRODUCTION	s ENGR	DATE 8-76-87
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