

CONVERSATION RECORD

TIME

DATE

7-6-94

TYPE

☐ VISIT

☐ CONFERENCE

☒ TELEPHONE

☐ INCOMING

☐ OUTGOING

NAME/STY

Location of Visit/Conference:

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU

Deborah McKelvey

ORGANIZATION (Office, dept., bureau, etc.)

C. W. Trainer

TELEPHONE NO.

SUBJECT

Withdrawn APD's

Mills Federal - Wells 1 thru 6

SUMMARY

We are returning your copies of the above named APD's as per your request. If you have any questions regarding this action, please feel free to contact our office at 505-887-6544, extension 267.

DEC 21 1994

scr [Signature]

ACTION REQUIRED

NAME OF PERSON DOCUMENTING CONVERSATION

Mary Lou Trujillo

SIGNATURE

DATE

7-6-94

ACTION TAKEN

cc: Kathleen B.
BLM-CRA

SIGNATURE

TITLE

DATE

Examiner

7-6-94

04771-101

U.S. GPO: 1988-204-760/80144

CONVERSATION RECORD