WELLFILE CONTACT INFORMATION

OPERATOR NAME: Yates

WELL ID:

DATE CALLED: 3/8

PERSON CONTACTED: Rusty to return call

LOCATION:

PH. #:

REASON FOR CONTACT: Prod both zones since 3/2000 but Bone Spg w/ SI status. DHC apvd but not done per filed reports

LETTER: ___ YES ___ NO MAILED:

ATTN TO:

LOCATION:

INITIAL: