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| ONT WILL OF STATES  2. MANE OF OFERATOR  2. MANE OF OFERATOR  3. MANE OF OFERATOR  4. HAG OIL COMPANY  5. ADDRESS OF OFERATOR  4. ADDRESS OF OFERATOR  5. ADDRESS OF OFERATOR  6. WALL NO.  10. MIGHAN OF MICHAEL CHAPTER STATES  10. FINED AND Z267, Midland, Texas 79702  11. Increase of Debuy, 10. File and in accordance with any State requirements.*  11. Sec. 17. ADDRESS OF OFERATOR  12. OFFERATOR OF MILL (Report locations clearly and in accordance with any State requirements.*  13. BENATIONS (Show whether or, st. cs. cc.)  14. FERNIT NO.  15. BENATIONS (Show whether or, st. cs. cc.)  16. TREE WATER SHOTOPT  17. DECEMBER THAN OF STATES (Show whether or, st. cs. cc.)  17. THE WATER SHOTOPT  17. DECEMBER THAN OF STATES (Show whether or, st. cs. cc.)  18. COUNTY OF PARISH 13. ATTER  18. MORE SHOTOPT  | OIL AND WILL I DOTHER  2. MANN OF OFFICE AND STREET  3. ADDRESS OF CREATOR  P. O. BOX 2267, Midland, Texas 79702  4. Increase of Creators  As address of Theology:  10. Filled and Food, on wildcare Pitch of See also Space of Theology:  11. BECOME TO Hology:  12. STATE SHIPPOOF AS A STATE SHIPPOOF IN THE AND STATE SHIPPOOF OF A STATE SHIPPOOF OF  | (Do not use this form for proposals to drill or to deep                       | PORTS OBRS, WEWLYEXICO 88240  pen or plug back to a different reservoir.  "for such proposals.) | 6. IF INDIAN, ALLOTTEE OR TRIBE I                                    |
| HING OIL COMPANY  ADDRESS OF OFFERTOR  P. O. BOX 2267, Midland, Texas 79702  Internst of Wall, (Report location clearly and in accordance with any State requirements.*  At surface  1980' FSL & 1980' FWL  II. ALEXATIONS (Show whether Let, M., Os. 10.)  3400.7' GR  Check Appropriate Box To Indicate Notice, Report, or Other Data  NOTICE OF INTERNION 70:  TEST WATER SHOT-OFF PRACTURE TREAT SHOT-OFF PRACTURE TREAT SHOT OF ACTIONS  CHANGE FLANS  CHANGE | HING OIL COMPANY  HING OIL COMPANY  ADDRORAGE OF OFRALTER  HING OIL COMPANY  ADDRORAGE OF OFRALTER  LOWER OF OFRALTER  PLOADERS OF OFRALTER  ADDRORAGE OF OFRALTER  LOWER OF OFRALTER  PLOADERS OF OFRALTER  LOWER OF NOTIFICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER OF INTENTION (Show whicher or, st. de. etc.)  LOWER OFRALTER STATES  ADDRORAGE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  ADDROOMAGE STATES  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  ADDRORAGE STATES  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  ADDRORAGE STATES  ADDRORAGE STATES  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  ADDRORAGE STATES  ADDRORAGE STATES  NOTICE OF INTENTION (Show whicher or, st. de. etc.)  LOWER STATES OF ALEA  ADDROCAGE STATES  | OIL C GAS C   |   | 7. UNIT AGREEMENT NAME   |
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| Sector of Parish Survive State office use)    Sector of Section of | Sec. 55, T25S, R34E  Sec. 55, T25S, R34E  3400.7' GR  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  THEN WATER SECTORY PRACTURE THEAT SHOT OR ACIDIE REPAIR WELL CHANGE PLANS  (Other)  Confidence of Management and Control PRACTURE THEAT PROPOSE ON CONFLETE OFFRATIONS (Clearly state all pertinent details, and elvery retrice) depths for all surface data sentents when well, well is directionally drilled, give subsurface locations and measured and true vertical depths for all surface as some sentents when well, and the pertinent details, and elvery retriced depths for all surface as some sentents with well, and the pertinent details, and elvery retriced depths for all surface as some sentents with swell, and the pertinent details, and elvery retriced depths for all surface as some sentents with swell, and the pertinent details, and elvery retriced depths for all surfaces as some sentents with swell, and the pertinent details, and elvery retriced depths for all surfaces as some sentents with swell, and the pertinent details, and elvery retried depths for all surfaces as some sentents with swell, and the pertinent details, and elvery retried depths for all surfaces as some sentents of the pertinent details, and elvery retried depths for all surfaces as some sentents with swell surfaces and surfaces are some sentents with swell surfaces and surfaces are some sentents of the pertinent details, and elvery retried depths for all surfaces are some sentents of the pertinent depths for all surfaces are some sentents of the pertinent details, and elvery surfaces of multiple complete and control of the pertinent details, and elvery retried depths for all surfaces are some sentents of the pertinent details, and elvery retried depths for all surfaces are some sentents of the pertinent details, and elvery retried depths for all surfaces are some sentents.  It because the pertinent of the pertinent details, and elvery retried depths for all surfaces are some sentents.  It becau | At surface  |   |  |
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| Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  **NOTICE OF INTENTION TO:  **TEST WATER SHUT-OFF***  **PRACTURE TRANT***  **ALTERING CASINO SHOOTHER ALTER CASINO SHOOTHER ALTERING CASINO SHOOTHE | Check Appropriete Box To Indicate Nature of Notice, Report, or Other Data  Subsequent report of: 8/5/83  Trest water shut-off Full or Alter Casino Multiflet Completion on Well Substitute of Notice of Interview of State Casino Multiflet Completion of Check Appropriate Multiflet Completion on New Marker Shut-off Fracture treatment of Multiflet Completion on New Marker Shut-off Fracture treatment of Multiflet Completion on New Marker Shut-off Fracture treatment of Multiflet Completion on New Marker Shut-off Fracture treatment of Multiflet Completion on New Marker Shut-off Fracture treatment of Multiflet Completion on New Marker Shut-off Fracture treatment of Multiflet Completion on New Marker Shut-off Fracture treatment of Multiflet Completion on New Marker Shut-off Fracture treatment of Multiflet Completion on New Marker Shut-off Fracture treatment of Multiflet Completion on New Marker Shut-off Fracture treatment of Multiflet Completion on New Multiflet Completi |   |   | Sec. 5, T25S, R34E   |
| NOTICE OF INTENTION TO:  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT  FULL OR ALTER CASINO  MULTIPLE COMPLETE  SHOOT OR ACIDIZE  REPAIR WATER SHUT-OFF FRACTURE TREATMENT  SHOOT OR ACIDIZE  ABANDON'S PLANS  (Other)  7. DESCRIBE PROPERSE OF COMPLETED OPERATIONS (Clearly state all pertannt details, and give pertannt dates, including estimated due of narring rent to this work.)*  20-83 - Set 13,350 feet of 7" 26#, P110-S95. Cemented with 800 sacks HLW and 400 Sx. (30 minutes pressure tested to 2000#. WOC - 22 hours.  3. I hereby certify that the foregooks is true and correct  SIGNED  RETURN TREATMENT  ALTERING WELL  (Other)  ABANDON/SERT*  ALTERING CASINO  ARANDON/SERT*  ALTERING C | NOTICE OF INTENTION TO:  NOTICE OF INTENTION TO:  TEST WATER SHOT-OFF  PRACTURE TREAT  HULTIFLE COMPLETE  SHOOT OR ACIDIZED  AARMOON*  CHANGE FLANS  (Other)  T. DESCRIES INCORDS ON COMPLETED OFFERATIONS (Clearly state all pertinent details, and also pertinent details, and also pertinent details and true vertical depths for all utarkers and zones need to this work.)  T. DESCRIES INCORD. veel is directionally drilled, give subsurface locations and measured and true vertical depths for all utarkers and zones need to this work.)  T. DESCRIES INCORD. veel is directionally drilled, give subsurface locations and measured and true vertical depths for all utarkers and zones need to this work.)  T. DESCRIES INCORD. veel is directionally drilled, give subsurface locations and measured and true vertical depths for all utarkers and zones need to this work.)  T. DESCRIES INCORD. veel is directionally drilled, give subsurface locations and measured and true vertical depths for all utarkers and zones need to this work.)  T. DESCRIES INCORD. veel is directionally drilled. give subsurface locations and measured and true vertical depths for all utarkers and zones.  T. DESCRIES INCORD. veel is directionally drilled. give subsurface locations and measured and true vertical depths for all utarkers and zones.  T. DESCRIES INCORD. veel is directionally drilled. give subsurface locations and measured and true vertical depths for all utarkers and zones.  T. DESCRIES INCORD. veel is directionally drilled. give subsurface locations and measured and true vertical date of results of given in the complete of given in the com | ID. ZESTRIONS (SING   |   |  |
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| 8. I hereby certify that the foregoing is true and correct  SIGNED Retty hildon  (This space for Federal or State office use)  APPROVED BY  TITLE Regulatory Analyst  DATE  DATE   | 8. I hereby certify that the foregoing is true and correct  SIGNED Retty fildon  (This space for Federal of State office use)  APPROVED BY  CONDITIONS OF APPROVAL, IF ANY:  | oo minates pressure tested to   | 2000#: WOC - 22 HOUTS:  |  |
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| S. I hereby certify that the foregoing is true and correct  SIGNED Regulatory Analyst  Betty filden  (This space for Federal or State office use)  APPROVED BY TITLE   | SIGNED Structure that the foregoing is true and correct SIGNED Regulatory Analyst DATE 8/25/83  (This space for Federal or State office use)  APPROVED BY TITLE DATE   |   |   | 三 _ 8  |
| SIGNED Retty dildon  (This space for Federal or State office use)  APPROVED BY  TITLE  Regulatory Analyst  DATE  DATE  | SIGNED Regulatory Analyst  Betty-Bildon  (This space for Federal or State office use)  APPROVED BY CONDITIONS OF APPROVAL, IF ANY:   |   |   | ₹ ₩ ₹  |
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| APPROVED BY TITLE  | APPROVED BY TITLE DATE   | B. I hereby certify that the foregoing is true and correct                    |   | -  |
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|  | CONDITIONS OF APPROVAL, IF ANY:  | SIGNED Retty Dillow T   | Regulatory Analyst  | 8/25/83  |
|  |  | SIGNED Retty Sildon (This space for Federal or State office use)              | ·   | DATE   |
|  | *See Instructions on Royage Side   | SIGNED Retty tildon (This space for Federal or State office use)  APPROVED BY | ·   | DATE   |

AUG 2 6 1983

HORES GRAN