FORM 6-sm

North Dakota State Industrial Commission

SUBSURFACE MINERALS EXPLORATION PROGRAM

COMPLETION REPORT

Date_____

Operator: _____
_____
_____
_____

Address: _____
_____
_____
_____

Permit Area:_____

Permit Number:_____

List below all test holes drilled:

Location	Elevation	Total Depth	Type Logs Run	Date Plugged