Form 3160-5
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.: LC-029020 (g)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: DEXTER

9. WELL NO.: 2

10. FIELD AND POOL, OR WILDCAT: Grayburg-Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 22 T17S-R30E

12. COUNTY OR PARISH: EDDY

13. STATE: NM

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED
MAY 27 '88
O. C. D.
ARTESIA, OFFICE

1. OIL WELL [X] GAS WELL [ ] OTHER

2. NAME OF OPERATOR: ARROWHEAD OIL CORPORATION

3. ADDRESS OF OPERATOR: P.O. BOX 548, ARTESIA, NEW MEXICO 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface: 2310' From West Line & 2310' from South line

Unit K

14. PERMIT NO.: 30-015-10220

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3662 KB

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[ ]	REPAIRING WELL	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Change of owner			[X]
(Other)				(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

PREVIOUS OWNER:

RAY WESTALL
P.O. BOX 4
LOCO HILLS, NEW MEXICO 88255

18. I hereby certify that the foregoing is true and correct

SIGNED [signature] TITLE Production Clerk DATE 5/12/88

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
MAY 24 1988
CARLSBAD, NEW MEXICO

*See Instructions on Reverse Side

SJS

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its