

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N. M. OIL CONS. COMMISSION
SUBMIT IN TRIPlicate
(Other. In triplicate on Form 9-331)
PO BOX 1980
HOBBS, NEW MEXICO

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR M & G Oil, Inc.		8. FARM OR LEASE NAME DeSchmidt Federal	
3. ADDRESS OF OPERATOR P.O. Box 957 Crossroads, New Mexico 88114		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL & 660' FEL, Sec. 13, T-9-S, R-33-E Lea County, New Mexico		10. FIELD AND POOL, OR WILDCAT Vada Penn	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13, T-9-S, R-33-E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4320 GR		12. COUNTY OR PARISH Lea	
		13. STATE N.M.	

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Change in operator <input checked="" type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)*

Change operator from Pierce & Dehlinger to M & G Oil, Inc.

RECEIVED

APR 8 1983

OIL & GAS
MINERAL & ENERGY SERVICE
ROSWELL, NEW MEXICO

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

SIGNED Wm. Grossbeck

TITLE Vice President

DATE 4-7-83

(This space for Federal signature use)

(Orig. Sgd.) PETER W. CHESTER

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

AUG 9 1983

RECEIVED
AUG 10 1983
C.D.P.
HOBBS OFFICE