

Form 3160-5  
(June 1990)

RECEIVED  
OCT 31 5 40 AM '94

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION *CISF*  
Drawer DD  
Artesia, NM 88210

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

5. Lease Designation and Serial No.  
NMO47800 - *H*

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE**

7. If Unit or CA, Agreement Designation

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.

2. Name of Operator  
RAY WESTALL

TAYLOR FEDERAL #17

3. Address and Telephone No.  
P.O. BOX 4 LOCO HILLS NM 88255 (505) 677-2370

9. API Well No.  
30-015-26660

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

10. Field and Pool, or Exploratory Area

2310' FSL & 2180' FEL  
SECTION 12 T18S R31E

SHUGART YATES 7RVRS QN  
11. County or Parish, State GRBRG

EDDY

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other CHANGE OF OPERATOR & CHANGE OF WELL NAME
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

AS REQUIRED BY 43 CFR 3100.0-5(A) AND 43 CFR 3162.3 WE ARE NOTIFYING YOU OF A CHANGE OF OPERATOR ON THE ABOVE REFERENCED LEASE.

RAY WESTALL, AS NEW OPERATOR, ACCEPTS ALL APPLICABLE TERMS, CONDITIONS, STIPULATIONS AND RESTRICTIONS CONCERNING OPERATIONS CONDUCTED ON THE LEASE OR PORTION OF LEASE DESCRIBED.

RAY WESTALL MEETS FEDERAL BONDING REQUIREMENTS AS FOLLOWS (43 CFR 3104):  
BOND COVERAGE: STATEWIDE  
BLM BOND FILE NO.: NM 0322

THE EFFECTIVE DATE OF THIS CHANGE IS OCTOBER 1, 1994.

CHANGE OF NAME: FROM COMANCHE FEDERAL #1  
TO: TAYLOR FEDERAL #17

ACCEPTED FOR RECORD  
*J. Lara*  
REC 2 - 1994  
CARLSBAD, NEW MEXICO

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

Signed *Joanell Gorden* Title PRODUCTION ANALYST Date 10/17/94

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any: \_\_\_\_\_

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 jurisdiction.

**STATEMENT ACCEPTING RESPONSIBILITY FOR OPERATIONS**

The undersigned accepts all applicable terms, conditions, stipulations, and restrictions concerning operations conducted on the leased land or portion thereof, as described below:

LEASE NO.: NM047800

LEGAL DESCRIPTION: 2310' FSL & 2180' FEL  
UL J  
SECTION 12 T18S R31E

FORMATION(S): QUEEN

BOND COVERAGE: STATEWIDE

BLM BOND FILE NO. NM 0322

AUTHORIZED SIGNATURE:

Juanel Garden

TITLE: PRODUCTION ANALYST

DATE: OCTOBER 17, 1994

Form 3160-5  
 (June 1990)

UNITED STATES  
 DEPARTMENT OF THE INTERIOR  
 BUREAU OF LAND MANAGEMENT

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 Budget Bureau No. 1004-0135  
 Expires: March 31, 1993

5. Lease Designation and Serial No.  
 LC 047800(A)

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. COMANCHE  
 FEDERAL # 1

9. API Well No.  
 30-015-26660

10. Field and Pool, or Exploratory Area  
 SHUGART FIELD

11. County or Parish, State  
 EDDY

SUBMIT IN TRIPLICATE

RECEIVED

APR 29 '94

O. C. D.  
 ARTESIA, OFFICE  
 915-688-6943

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
 SOUTHLAND ROYALTY COMPANY

3. Address and Telephone No.  
 P.O. Box 51810 Midland, TX 79710

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
 UNIT J, 2310' FSL & 2180' FEL  
 SEC. 12, T18S, R31E

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
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	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>REQUEST FOR STATUS</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*  
 AS PER YOUR REQUEST DATED MARCH 23, 1994 REGARDING STATUS OF THE ABOVE NAMED WELL.

PLEASE BE ADVISED THAT THIS WELL IS IN THE PROCESS OF BEING SOLD AND THIS TRANSACTION SHOULD BE COMPLETED IN APPROXIMATELY 45 DAYS. A CHANGE OF OPERATOR WILL BE FILED AS SOON AS THIS WELL IS SOLD.

*J. Lara*  
 APR 28 1994

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

Signed *Donna Williams* DONNA WILLIAMS

Title PRODUCTION ASSISTANT

Date 4/11/94

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
 Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_

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 jurisdiction.