

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil & Gas  
311 S. 1st St  
Artesia, NM 87003-2834

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

5. Lease Designation and Serial No.  
NMNM29234  
6. If Indian, Allottee or Tribe Name

**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

**SUBMIT IN TRIPLICATE**

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

RSE Partners - 1, L.P.

3. Address and Telephone No.

408 W. Wall Midland, TX 79701

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

1980 FSL, 660 FWL

Unit L, Sec 8, T24S, R31E

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Lotos Fed 802

9. API Well No.

30-015-28654

10. Field and Pool, or Exploratory Area

Wildcat Delaware

11. County or Parish, State

Eddy, NM

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

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other Change of Operator  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ 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.)\*

Change of Operator effective 4/1/99.

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

BLM Bond File No: NM2689

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

Signed [Signature]

Title Rob Lemmons - Operations Manager

Date 02/17/2000

(This space for Federal or State office use)

Approved by \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Conditions of approval, if any: