

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

COO-100BBS

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

5. Lease Designation and Serial No
NMNM 93034

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 Gas
 Well Well Other ✓

7 If Unit or CA, Agreement Designation

8 Well Name and No

Carlson B 27 #2 ✓

2 Name of Operator
FULFER OIL & CATTLE CO. LLC /

9 API Well No.

30-025-11809 ✓

2 Address Telephone No
P.O. BOX 1224, JAL, NM 88252 505-395-9970

10 Field and Pool, or Exploratory Area

Langlie Mattix; 7 Rvrs-Q-GB ✓

3 Location of Well (Footage, Sec., T,R.,M., or Survey Description)
2310' FSL & 330' ~~FEL~~ (NESE), Unit 1, Sec. 27, T25S, R37E ✓
FWL

11. County or Parish, State

Lea County, NM ✓

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

We, as new operator, accept all applicable terms, conditions, stipulations and restrictions concerning operations Conducted on the lease or portion of lease described.

BLM Bond File No.: RLB0001468

The effective date of this change is May 1, 2009.

RECEIVED
JUN 24 2009
HOBBSOCD

APPROVED
JUN 22 2009
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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

Signed *Drew Fulfer* Title Member

(This space for Federal or State office use)

Approved by _____ Title **PETROLEUM ENGINEER**

Date **JUN 29 2009**

Conditions of approval, if any.

L

KA