

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

ORIGINAL RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on reverse side)

BLM Roswell District
Modified Form No.
ND60-3160-4

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"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-063659	
2. NAME OF OPERATOR Davcro, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 2124 Broadway, Lubbock, Texas 79401		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL x 660' FWL Section 28, T9S, R38E.		8. FARM OR LEASE NAME Gandy 59	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DP, RT, GR, etc.)		10. FIELD AND POOL, OR WILDCAT Sawyer San Andres (Assoc)	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 28, T9S, R38E	
		12. COUNTY OR PARISH Lea	13. STATE NM

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)	<input 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 checked="" type="checkbox"/>
(Other) to change operator	<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.)

Filed to change operator from Kerr-McGee Corp. to Davcro, Inc., effective 12-1-90.

Statewide bond sent to BLM, Santa Fe, N.M. on 9-20-90. Approved 9-24-90.

RECEIVED
JAN 23 12 57 PM '91
BLM

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

SIGNED David L. Jones TITLE President

DATE 1-18-91

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side