	S ON WELLS If or to re-enter an for such proposals.  Ins on reverse side.	FORM APPROVED OMB No. 1004-0137 Expires March 31, 2007  5. Lease Serial No.  CO29392B  6. If Indian, Allottee or Tribe Name  7. If Unit or CA/Agreement, Name and/or No.  8. Well Name and No.  HMKLE B FEDERAL  9. API Well No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  SEVERAL	3.308.0722	10. Field and Pool, or Exploratory Area  5 HU 6 PAT: Y - 72 - 0 - 65  11. County or Parish, State  EDDY, MM
12 CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA		
TYPE OF SUBMISSION TYPE OF ACTION		
Notice of Intent		
Name (Printed/Typed)		
Randall L. Harris	Tide Manager	
Signature THIS SPACE FOR FEDE	Date	USE APPROVED

Title

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to apy-department or agency! Of the Unfield States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

Approved by

Conditions of approval, if any, are attached. Approval of this notice does not warrant or

certify that the applicant holds legal or equitable title to those rights in the subject lease

which would entitle the applicant to conduct operations thereon.