

RECEIVED

NM Oil Cons. Commission
 Printer DD
 Artesian, NM 88210

4/6

Form 9-331
 Dec. 1973

10 33 AM '89

Form Approved.
 Budget Bureau No. 42-R1424

UNITED STATES
 DEPARTMENT OF THE INTERIOR
 GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

RECEIVED

2. NAME OF OPERATOR

LANEXCO, INC.

JUL 12 '89

3. ADDRESS OF OPERATOR

P.P. BOX 1206 Jal, NM 88252

O.C.D

4. LOCATION OF WELL (REPORT LOCATION CLEARLY, SEE SPACE 17 below.)

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

660' NW

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
 FRACTURE TREAT ☐
 SHOOT OR ACIDIZE ☐
 REPAIR WELL ☐
 PULL OR ALTER CASING ☐
 MULTIPLE COMPLETE ☐
 CHANGE ZONES ☐
 ABANDON* ☐
 (other) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE

NM-26069

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

D

8. FARM OR LEASE NAME

BLAKEMORE FEDERAL

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

So. PECOS SLOPE ABO

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 20; T9S; R.26E

12. COUNTY OR PARISH

CHAVES

13. STATE

NM

14. API NO.

30-005-60586

15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Change of operator from ALPHA TWENTY-ONE PRODUCTION COMPANY to LANEXCO, INC.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE Exec. Vice Pres. DATE 1/10/89

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY:

APPROVED
 PETER W. CHESTER

JUL 11 1989

BUREAU OF LAND MANAGEMENT
 ROSWELL, NM