

NM Oil Cons. Commiss.
Drawer DD

Artesia, NM 88210

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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
Kaiser-Francis Oil Company

3. Address and Telephone No.
P. O. Box 21468, Tulsa, OK 74121-1468 918-491-4314

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SW SE (660' FSL & 1980' FEL) of Sec. 14-10S-29E

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

5. Lease Designation and Serial No.

NM-14774

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Rutter Federal #1

9. API Well No.

30-005-60635

10. Field and Pool, or Exploratory Area

Sand Ranch (Morrow)

11. County or Parish, State

Chaves, NM

2. 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 <u>Change of operator</u>	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

3. 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.)*

Effective 7/1/93 Kaiser-Francis Oil Company took over operations of the above well from MGF Oil Corporation.

Be advised that Kaiser-Francis Oil Company is considered to be the operator of the above described lands and is responsible under the terms and conditions of the lease for the operations conducted on the leased lands or portions thereof. Bond coverage for the well is provided by Bond No. YPBNS1315279, Principal Kansas City Fire Insurance Company.



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

Signed C. Van Valkenburg Title Charlotte Van Valkenburg Date 10/20/93

(This space for Federal or State office use)

Approved by _____ Title _____
Conditions of approval, if any:

Date

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side