

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION
Drawer DD
Artesia, NM 88210
FORM APPROVED

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

5. Lease Designation and Serial No.

NM-0560379

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

S.W. HENSHAW PREMIERE UNIT

8. Well Name and No.

S.W. HENSHAW PREMIERE UNIT

9. API Well No.

7

30-015-03898

10. Field and Pool, or Exploratory Area

S.W. HENSHAW PREMIER

11. County or Parish, State

Eddy County, NM

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

FRED JONES DBA KAY JAY OIL CO.

3. Address and Telephone No.

P.O. BOX 1306, ARTESIA, NM 88210 (505) 746-6100

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660 FNL 1980 FWL, Sec. 17-T16S-R30E, UNIT C

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other CHANGE CO. NAME

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut Off
☐ Conversion to Injection
☐ Dispose Water

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

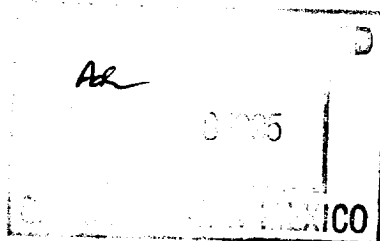
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

WE HAVE CHANGED OUR NAME FROM ZIA ENTERPRISES TO FRED JONES DBA KAY JAY OIL COMPANY. THIS IS NOT A CHANGE OF OPERATOR. THE NAME CHANGE HAS ALREADY BEEN APPROVED ON OUR BONDS. WE WERE HAVING CONFLICTS WITH OTHER BUSINESSES WHICH HAD SIMILAR NAMES TO ZIA ENTERPRISES. THIS WAS EFFECTIVE 9/21/92.

RECEIVED

AUG 22 1995

OIL CON. DIV.
DIST. 2



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

Signed Robin Smith

Title PRODUCTION CLERK

Date 7/20/95

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____