

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION

Drawer DD
Artesia, NM

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

5 Lease Designation and Serial No.

NM05186

6 If Indian, Allottee or Tribe Name

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

RECEIVED

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Glen Plemons

3. Address and Telephone No.

P.O. Box 113, Lovington, NM 88261-0113

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

Unit P: Sec 27 TWS 16S Range 31E 330' from South Line
330' from East Line

7. If Unit or CA, Agreement Designation

8. Well Name and No.

#1

Chase Featherstone Fed

9. API Well No.

30-015-04887

10. Field and Pool, or Exploratory Area

Square Lake GB SA

11. County or Parish, State

Eddy, NM

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 in Operator

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

(Note: Report results of multiple completion well Completion or Recompletion on 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.)

AS REQUIRED BY 43 CFR 3100.0-5(A) AND 43 CFR 3162.3 WE ARE
NOTIFYING YOU OF A CHANGE OF OPERATOR ON THE ABOVE REFERENCED LEASE.

GLEN PLEMONS, AS NEW OPERATOR, ACCEPTS ALL APPLICABLE TERMS,
CONDITIONS, STIPULATIONS AND RESTRICTIONS CONCERNING OPERATIONS
CONDUCTED ON THE LEASE OR PORTION OF LEASE DESCRIBED.

~~BARBARA PLEMONS~~ MEETS FEDERAL BONDING REQUIREMENTS AS FOLLOWS (322371)
Glen Plemons BOND COVERAGE: STATEWIDE
BLM BOND FILE NO.:

THE EFFECTIVE DATE OF THIS CHANGE IS JUNE 1, 1994.

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

Signed

Title

Owner/Operator

Date

6/1/94

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: