(other) Change of Ownership

UNI._D STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

Dec. 1973	N.MI.O.O.D. COPY						Budget Bureau No. 42-R1424			
	UN: DEPARTMEN		TATES THE INTER	IOR	5.	. LLASE SRLG Un	it	Fed.	LC028755A	
GEOLOGICAL SURVEY					6.	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 plug back to a different						7. UNIT AGREEMENT NAME Same 8. FARM OR LEASE NAME Same Ship Ship Ship				
reservoir, Use Form 9-331-C for such proposals.)				_ 8.						
1. oil well	gas well	other	Injectio	n	9,	WELL NO.	<u>>+ </u>	<u> </u>		
2. NAME OF OPERATOR						42				
L. Texas Enterprises, Inc.					_ 10.	10. FIELD OR WILDCAT NAME				
3. ADDRESS OF OPERATOR					<u> </u>	Red Lake Grayburg				
Suite 1601, 1 Houston Ctr., Houston, Tx. 77002					2 11.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 35, T-17-S, R-27-E				
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) Unit N: 990' FSL & 1650' FWL of Sec. 35										
AT SURF					12.	COUNTY O	R PARISH			
AT TOP PROD. INTERVAL:						Eddy		New M	exico	
AT TOTAL DEPTH:					_ 14.	API NO.				
16 CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.					ı	NA				

AT SURFACE: AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES** ABANDON*

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

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

3,624' GL

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 3 & D Cil Co. to L. Temas Enterprises, Inc. (Lesses) Effective August 1, 1980

RECEIVED

SEP 24 1980

O. C. D. ARTESIA, OFFICE

__ Set @ _____ Subsurface Safety Valve: Manu. and Type ____ 18. I hereby certify that the foregoing is true and correct ACCEPTED FOR RECORD TITLE Agent DATE __8/15/80 ce for Federal or State office use) (This sp __ DATE _ APPROVED BY CONDITIONS OF APPROVAL STRY? U.S. GEOLOGICAL SURVEY ROSWELL, NEW MEXICO *See Instructions on Reverse Side