Form 3160-5 (November 1983) (Formerly 9-331) DEPARTMENT OF THE INTER BUREAU OF LAND MANAGEMENT	A THE THE ATT A	Form approved. Budget Bureau No. 1004-01:5 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO. NM-7066	
SUNDRY NOTICES AND REPORTS C (Do not use this form for proposals to drill or to deepen or plug be Use "APPLICATION FOR PERMIT-" for such pro	DN WELLS ack to a different reservoir. oposais.)	8. IF INDIAN. ALLOTTEE OR TRIBE NAME N/A	
I. OIL WELL GAS WELL WELL XX OTHER CHANGE OF OPERATOR 2. NAME OF OPERATOR		7. UNIT AGREEMENT NAME N/A	
GENERAL ATLANTIC RESOURCES, INC.	(303) 573-5100	8. FARM OR LEASE NAME WILLIAMSON FEDERAL COM	
3. ADDRESS OF OPERATOR 410-17th St., Suite #1400, Denver, C 4. LOCATION OF WELL (Report location clearly and in accordance with any S See also space 17 below.) At surface 660' FNL & 1980' FWL 14. PERMIT NO. 15. ELEVATIONS (Show whether DF. GR: 3692'	State requirements.*	9. WELL NO. #1 10. FIELD AND POOL, OR WILDCAT Diamond Mound 11. SEC. T. B. M., OR BLE. AND SUBVET OR AREA Sec. 12-T16S-R27E 12. COUNTY OR PARISE 13. STATE Eddy New Mexico	
16. Check Appropriate Box To Indicate No NOTICE OF INTENTION TO:		Other Data UENT BEFORT OF:	
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) CHANGE OF OPERATOR XX	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (Note: Report results (Umpletion or Recours	ALTERING WELL ALTERING CASING ABANDONMENT [®] of multiple completion on Well letion Report and Log form.)	

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.)*

This is to advise that Operator for the captioned well has changed to General Atlantic Resources, Inc. General Atlantic Resources, Inc. is fully bonded under BLM Nationwide Bond No. CO-0836 which is on file in the Lakewood, Colorado, Youngfield Street office, Bureau of Land Management.

The well is currently in a producing status.

<u>.</u>	ALCOSTED FOR RECOMM ALCOSTED FOR RECOMM ANY 51089 CARLSBAD, AV MERICO	AND OF LAND MCCF/NED MAY 05 1989 ⁶ N.M. New Mexico
18. I hereby certify that the foregoing is true and correct SIGNED	TITLE Engineering Technician	DATE25 Apr 1989
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE

*See Instructions on Reverse Side