

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-11327

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Norman Federal

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

Henshaw Q-GB-SA

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 14-16S-30E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Change of Operator

RECEIVED

2. NAME OF OPERATOR

MorOilco, Inc. STRATA PRODUCTION CO

3. ADDRESS OF OPERATOR

Drawer 1, Artesia, New Mexico 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface

DEC 29 '88

O. C. D.  
ARTESIA, OFFICE

1980 FSL & 1980 FWL  
Sec. 14 T16S R30E

14. PERMIT NO.

15. ELEVATIONS (Show whether DE, RT, GR, etc.)

3829.1 GL

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☐

ABANDON\* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT\* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) Change of Operator ☒

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

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.)\*

Operations have been changed from:

MorOilco Inc.

Drawer 1

Artesia, New Mexico 88210 (Old Operator)

To:

Strata Production Company

648 Petroleum Bldg.

Roswell, New Mexico 88201 (New Operator)

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

SIGNED

Frank A. May

TITLE Vice-President

DATE 11-30-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

DEC 27 1988