

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.

NMNM12110

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Crow Flats Fed Com Unit #1

9. API Well No.

30-015-23386

10. Field and Pool, or Exploratory Area

Dog Canyon (Wolfcamp)

11. County or Parish, State

Eddy

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

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Walker, Kent

3. Address and Telephone No.

P. O. Box 7663, Midland, TX (915) 694-8228

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

1980 FSL & 1980 FWL of Unit K, Sec. 1, T30, R16S, 28E

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 Operator Name Change

- ☐ 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.)*

STATEMENT ACCEPTING RESPONSIBILITY FOR OPERATIONS:

The undersigned accepts all applicable terms, conditions, stipulations, and restrictions concerning operations conducted on the leased land or portion thereof, as described below:

BOND COVERAGE: Personal Surety Bond CD#7215

BLM BOND FILE NO: CD BO#2548

OIL CON. DIV.
DIST. 2

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.

The effective date of this change is April 1, 1995

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

Signed

Kent Walker

Title

Agent

Date

4/30/95

(This space for Federal or State Office use)

Approved by

Conditions of approval, if any:

Title

Date