

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other instructions
verse side)

Budget Bureau No. 1004
Expires August 31, 1987

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Change of Operator		RECEIVED BY JUN 11 1987 C. D. OFFICE
2. NAME OF OPERATOR Hondo Oil and Gas Company		
3. ADDRESS OF OPERATOR 105 East 3rd, Suite 415, Roswell, NM 88201		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL & 519' FWL		
5. LEASE DESIGNATION AND SEE LC-02943	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME
		8. FARM OR LEASE NAME J. L. Keel "A"
		9. WELL NO. 14
		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson-7R, Q.G.S.A.
		11. SEC., T., S., M., OR BLK. AND SURVEY OR ARMA Sec. 7, T-17S, R-31E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH Eddy
		13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
MULTIPLE COMPLETE	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
CHANGE PLANE	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Change of Operator	<input checked="" type="checkbox"/>		

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.)*

The parties listed below wish to notify this Commission of the change of operator for the well described above.

From: Arco Oil and Gas Company, a Division of Atlantic Richfield Company
P. O. Box 1610
Midland, Texas 79702

TO : Hondo Oil and Gas Company
105 West 3rd Street, Suite 415
Roswell, New Mexico 88201

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

SIGNED <u>Layne Lohr</u>	TITLE <u>Production Clerk</u>	DATE <u>3/20/87</u>
(This space for Federal or State office use)		
APPROVED BY <u>Arco Area Manager</u>	TITLE _____	DATE <u>JUN 3 1987</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side