

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
JUN 13 1991
O. C. D.
ARTESIA, OFFICE

FORM APPROVED
Budget Bureau No. 1004-1135
Expires September 30 1990

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

Damson Oil Corporation

3. Address and Telephone No

3300 N. "A", Bldg. 8, Midland, Texas 79705 915-687-0455

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

330' FNL & 330' FWL, Sec. 20, T17S, R30E

5. Lease Designation and Serial No

NMLC054988B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Jenkins B Federal #5

9. API Well No.

3001521944

10. Field and Pool, or Exploratory Area

Grayburg Jackson

11. County or Parish, State

Eddy, NM

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

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection

Change of Operator

(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.)

CHANGE OF OPERATOR EFFECTIVE 3/1/91

FROM: DAMSON OIL CORPORATION
3300 N. "A", Bldg. 8
Midland, Texas 79705

TO: PARKER & PARSLEY DEVELOPMENT COMPANY
P.O. Box 3178
Midland, Texas 79702

ACCEPTED FOR RECORD

JUN 11 1991

OSBRO NEW MEXICO

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

Signed

Pam R. Boren

Title

Mgr. Oper. Acctg.

Date

2-19-91

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: