Form 3160-5 (June 1990)

any matter within its jurisdiction.

## UN D STATES DEPARTME. I OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

MM OIL CONS COMMITTEE Drawer DD Artesia, NM 88210

**FORM APPROVED** 

Budget Bureau No. 1004-0135 Expires March 31, 1993

5. Lease Designation and Serial No.

| Do not use this form for proposals to drill   | S AND REPORTS ON WELLS or to deepen or reentry to a different reservoir. OR PERMIT—" for such proposals   | Lease Designation and Serial No.  LC-029426-A     If Indian, Allottee or Tribe Name  |
|---|---|--|
| SUBMIT IN TRIPLICATE  1. Type of Well  Oil Gas Other  Well Other  |   | N/A 7. If Unit or CA, Agreement Designation N/A 8. Well Name and No.   |
|   |   |  |
| <ol> <li>Address and Telephone No.</li> <li>20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)552-4527</li> <li>Location of Well (Footage. Sec., T., R., M., or Survey Description)</li> <li>1299' FSL &amp; 2675' FWL. Sec. 4-17S-31E</li> </ol> |   | 9. API Well No.<br>30-015-28325  |
|   |   | 10. Field and Pool, or Exploratory Area  Grayburg-Jackson  11. County or Parish, State  Eddy Co., NM   |
| CHECK APPROPRIATE BOX(s   | s) TO INDICATE NATURE OF NOTICE, RE   | EPORT, OR OTHER DATA   |
| TYPE OF SUBMISSION  | TYPE OF ACTIO   | ON   |
| Notice of Intent  Subsequent Report  Final Abandonment Notice  13. Describe Proposed or Completed Operations (Clearly state all per locations and measured and true vertical depths for all market  | Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other Change well name  Trinent details, and give pertinent dates, including estimated date of starting as and zones pertinent to this work.)* | 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.)  my proposed work. If well is directionally drilled, give subsurface |
| Please change the name of this  | well from: West "A" #33 or West "A"   | Federal #33 ES ES  |
| REC'  | 1 4 1995 A. Jana  |  |
|   | ON. DIV.<br>DIST. 2   |  |
| 14. I hereby certify that the foregoing is true and correct Signed Kann Rosa Byl This space for Federal or State office use)  | KAREN ROSA  | Date 6/5/95  |

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to