

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		MAR 26 1980	
2. NAME OF OPERATOR Rhonda Operating Company		O. C. D.	
3. ADDRESS OF OPERATOR 511 North Main, Midland, Texas 79701		ARTESIA, OFFICE	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 330 N - 330 W 330 feet from Northwest corner		8. FARM OR LEASE NAME Federal EA	
14. PERMIT NO. Pending		15. ELEVATIONS (Show whether DF, RT, GR, etc.)	
		10. FIELD AND POOL, OR WILDCAT Wildcat Emp. Add	
		11. SEC. T. R. M., OR BLK. AND SURVEY OR AREA NW/4, Sec 12, T18S, R27E	
		12. COUNTY OR PARISH Eddy Co.	
		13. STATE N. Mex.	

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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Change of Operator <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.)*

Change of Operator from Robert G. Cox to Rhonda Operating Company.

APPROVED: Robert G. Cox
ROBERT G. COX

RHONDA OPERATING COMPANY
By: Ralph Viney
Ralph Viney

SIGNED C. E. Cardwell Jr. ATLANTIC RICHFIELD COMPANY
TITLE Attorney-in-Fact DATE 12-10-79

18. I hereby certify that the foregoing is true and correct
SIGNED Al Wherry AMOCO PRODUCTION COMPANY
TITLE ATTORNEY-IN-FACT DATE 12-10-79

(This space for Federal or State office use)
Accepted ALBERT R. STALL
APPROVED BY ALBERT R. STALL TITLE ACTING DISTRICT ENGINEER DATE MAR 26 1980

CONDITIONS OF APPROVAL, IF ANY: