Form 3160-5 (June 1990)	UNITED STATES DEPARTMENT OF THE INTER	HE INTERIOR	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993
			5. Lease Designation and Serial No. NMNM54184
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			6. If Indian, Allottee or Tribe Name
	7. If Unit or CA, Agreement Designation		
1. Type of Well Oil Gas Well Well	8. Well Name and No.		
2. Name of Operator	Other		Dunn B Federal #20
Melrose Operating Co			9. API Well No.
3. Address and Telephone No.			30-015-0/8/4
PO Box 5061, Midland, TX 79704			10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Artesia (QN-GB-SA)
1980 FNL, 660 FEL, H Sec. 10, T185, R28E			11. County or Parish, State Eddy Co., NM
12. CHECK AP	PROPRIATE BOX(s) TO IND	ICATE NATURE OF NOTICE, REPORT, C	•
	TYPE OF SUBMISSION TYPE OF ACTION		
Notice of In	tent	Abandonment	Change of Plans
		Recompletion	
🗙 Subsequen	t Report	Plugging Back	Non-Routine Fracturing
		Casing Repair	Water Shut-Off
Final Aband	fonment Notice	Altering Casing	Conversion to Injection
		Other Change of Operator	Dispose Water
		•••	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
As required by 43 CFR Melrose Operating Co. conducted on this leas Bond Coverage: Stat BLM Bond File No.: Former Operator: St	3100.0-5(A) and 43 CFR 3162.3 as new operator accepts all applice or portion of lease described. wwide Bond - State of New Mexic	e vertical depths for all markders and zones pertinent to this v 3, we are notifying you of change of operator on t icable terms, conditions, stipulations and restrictions	the above referenced well.
14. I hereby certify that the form Signed <u>JulhQU</u> (This space for Federal or Sta Approved by Conditions of approval, if any:	Conjain lo office pree)	Title	Date
	nakes it a crime for any person knowingly as to any matter within its jurisdiction.	and willfully to make to any department or agency of the Unit	ed States any false, fictitious or fraudulent