

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side.)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

R. Q. Silverthorne *Manzano Oil Corp.*

3. ADDRESS OF OPERATOR

P.O. Drawer 10, Plainview, TX 79072

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface

P 500' FSL & 330' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, BT, GR, etc.)

3558.2'

5. LEASE DESIGNATION AND SERIAL NO.

RENEWED-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Nov 14 12 25 PM '88

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lanning

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Shugart-Yates-SR-Q-C

11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA

25 T18S R30E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other) Change of Operator

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(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 R. Q. Silverthorne to:

Manzano Oil Corporation  
P.O. Box 2107  
Roswell, NM 88202-2107

Telephone: 505/623-1996

Effective November 1, 1988

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

SIGNED

R. Q. Silverthorne

TITLE

Self

DATE

10/25/88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side