

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division

811 S. 1st St.
Artesia, NM 87003-2834

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

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

VERNON E. FAULCONER, INC.

3. Address and Telephone No.

P.O. BOX 7995, TYLER, TEXAS 75711 (903) 581-4382

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

660 ft. ~~FEL~~ and 1980 ft. FEL, Sec. 20-T18S-R25E
FSL

5. Lease Designation and Serial No.

NM 0487738

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

SRM-1149

8. Well Name and No.

Penasco #1

9. API Well No.

30-015-22077

10. Field and Pool, or Exploratory Area

Penasco Draw Morrow

11. County or Parish, State

Eddy, New Mexico

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 OPERATOR

- ☐ 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.)

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

FROM: Cross Timbers Operating Company
PO Box 52070
Midland, TX 79710-2070

TO:

VERNON E. FAULCONER, INC.
P.O. BOX 7995
TYLER, TEXAS 75711

THE EFFECTIVE DATE OF TRANSFER:

" Effective 4-1-99 Vernon E. Faulconer, Inc. is responsible under the terms and conditions of the lease for operations conducted on the lease lands or a portion thereof."

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

Signed

Title Vice President

Date 5-3-99

(This space for Federal or State office use)

/s/ Mary Lou Ormseth

Title

Legal Assistant Supervisor

Date

7-19-99

Approved by
Conditions of approval, if any: