

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIE  
(Other instruction, reverse side)

Form approved.  
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 reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

|  |  |  |
|--|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>   | RECEIVED                                       | 5. LEASE DESIGNATION AND SERIAL NO.<br>NM-9542-A                         |
| 2. NAME OF OPERATOR<br>Ominex Petroleum, Inc.  | MAY 22 1991                                    | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                     |
| 3. ADDRESS OF OPERATOR<br>8055 E. Tufts Ave. Pkwy Ste. 1060, Denver, CO 80237  | O. C. D. ARTESIA OFFICE                        | 7. UNIT AGREEMENT NAME   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>660' FNL and 1980' FEL<br>Unit B, Sec. 5, T-18-S, R-25-E<br>NMPM, Eddy County, New Mexico |  | 8. FARM OR LEASE NAME<br>Grynberg "A" Federal                            |
| 14. PERMIT NO.   | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | 9. WELL NO.<br>1   |
|  |  | 10. FIELD AND POOL, OR WILDCAT<br>Eagle Creek Permo Penn                 |
|  |  | 11. SEC., T., R. M. OR BLK. AND SURVEY OR AREA<br>Sec. 5, T-18-S, R-25-E |
|  |  | 12. COUNTY OR PARISH<br>Eddy   |
|  |  | 13. STATE<br>NM  |

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

NOTICE OF INTENTION TO:

|  |   |
|--|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETE <input type="checkbox"/>    |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input type="checkbox"/>             |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         |
| (Other) <input type="checkbox"/>             |   |

SUBSEQUENT REPORT OF:

|   |  |
|---|--|
| WATER SHUT-OFF <input type="checkbox"/>                         | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREATMENT <input type="checkbox"/>                     | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/>                  | ABANDONMENT* <input type="checkbox"/>    |
| (Other) <input checked="" type="checkbox"/> Change in Ownership |  |

(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 in Ownership

Old Owner/ Operator: Chevron U.S.A. Inc.  
P.O. Box 1150  
Midland, TX 79702

New Owner/ Operator: Ominex Petroleum, Inc.  
8055 E. Tufts Ave. Ste. 1060  
Denver, CO 80237

Effective Date: 5/1/91

API # 30-015-22313



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

SIGNED Patricia G. Blue

TITLE Production Analyst

DATE 5/1/91

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side