

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

RECEIVED

LC-029387(d)

D. OF INDIAN, ALLOTTEE OR TRIBE NAME

NOV 11 12 27 PM '88

7. UNIT ASSIGNMENT NAME

8. FARM OR LEASE NAME

Kenwood

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Shugart-Yates-SR-Q-CR

11. SEC. T. R. M. OR BLS. AND

Sec 30 T18S R31E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a reservoir.
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

M 330' FSL & 660' FWL

14. PERMIT NO.

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

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Change of Operator

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENTS*

(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 and
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all intervals and subs per-
nent 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

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side