

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-4025
2. Name of Operator FASKEN OIL AND RANCH, LTD.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 303 West Wall Ave., Suite 1900 - Midland, Texas 79701-5116	7. If Unit or CA, Agreement Designation SW-1084
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL, 660' FWL Sec. 21, T20S, R25E	8. Well Name and No. Cemetery Fed. Com. #1
	9. API Well No. 30-015-21342
	10. Field and Pool, or Exploratory Area Cemetery (Morrow)
	11. County or Parish, State Eddy County, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Operator Name Change</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> 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.)*

Changing operator name from BARBARA FASKEN to FASKEN OIL AND RANCH, LTD.
effective January 1, 1996.

Rider to Federal bond was filed in Santa Fe, New Mexico, in December, 1995.

RECEIVED

OIL CON. DIV.

JAN 30 11 20 AM '96
FCS
AREA

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14. I hereby certify that the foregoing is true and correct.
Signed Jimmy W. Davis, Jr. Title Operations Manager Date January 26, 1996
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side