

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
N.M. Oil Cons. Division  
811 S. 1st Street  
Alameda, NM 88210-2834

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  
MOMENTUM OPERATING CO., INC.

3. Address and Telephone No.  
1008 WEST BROADWAY, HOBBS, NM 88240 505/393-2727

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
330 FNL 330 FWL  
SEC 27, T18S, R31E

5. Lease Designation and Serial No.  
NMLC029392B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
HINKLE F FEDERAL #10

9. API Well No.  
30-015-24586

10. Field and Pool, or Exploratory Area  
SHUGART Y-SR-OU-GB

11. County or Parish, State  
EDDY CO., NM

12. CHECK APPROPRIATE BOX(es) 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 type="checkbox"/> Change of Plans         |
| <input type="checkbox"/> Subsequent Report        | <input type="checkbox"/> Recompletion                        | <input type="checkbox"/> New Construction        |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back                       | <input type="checkbox"/> Non-Routine Fracturing  |
|   | <input type="checkbox"/> Casing Repair                       | <input type="checkbox"/> Water Shut-Off          |
|   | <input type="checkbox"/> Altering Casing                     | <input type="checkbox"/> Conversion to Injection |
|   | <input checked="" type="checkbox"/> Other CHANGE OF OPERATOR | <input type="checkbox"/> Dispose Water           |

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

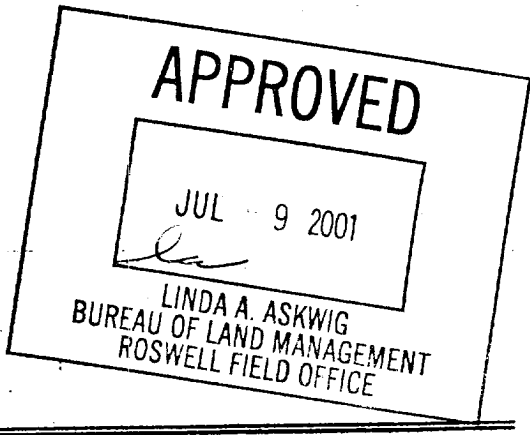
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

As required by 43 CFR 3100.5(A) and 43 CFR 3162.3, We are notifying you of change of operator on the above referenced well.  
Momentum Operating Co., Inc. as new operator accepts all applicable terms conditions, stipulations and restrictions concerning operations conducted on this lease or portion of lease described.

Bond Coverage  
BLM Bond File No. NM2886

Former Operator: Ready Oil and Gas Management

Change of Operator Effective: 12/01/00



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

Signed Ray Heard Title Agent Date 07/05/01

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Conditions of approval, if any:

RECEIVED

2001 JUL - 6 AM 10: 28

BUREAU OF LAND MGMT  
ROSWELL OFFICE