

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

MAR 25 1992

O. C. D.
ARTESIA OFFICE

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990

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 checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM08277
2. Name of Operator S & J Operating Company	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 2249, Wichita Falls, Tx. 76307 (817)-723-2166	7. If Unit or CA. Agreement Designation Saladar Unit-14-08-001-016916
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit K - 1650 FSL & 1650 FWL Sec 33, T20S, R28E	8. Well Name and No. Saladar Unit #5
	9. API Well No.
	10. Field and Pool, or Exploratory Area Saladar
	11. County or Parish, State Eddy

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

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" 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

(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 in operator from Barber Oil, Inc.
to S & J Operating Company

4 1992

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

Signed William M. Kucak Title Petroleum Engineer Date 5-31-91

(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 statement or fraudulent statement or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side