(June 1990) DEPARTM	TED STATES S OF THE INTERIOR F LAND MANAGEMENT	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No.
Do not use this form for proposals to	S AND REPORTS ON WELLS drill or to deepen or reentry to a different reservoir. OR PERMIT—" for such proposals	NM-0207950 6. If Indian. Allottee or Tribe Name
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation SW-381
Type of Well Oil Well Gas Well Other Name of Operator		8. Well Name and No. Shell Federal Com. #5
FASKEN OIL AND RANCH, LTD.		9. API Well No.
 Address and Telephone No. 303 West Wall Ave., Suite 1900 - Midland, Texas 79701-5116 Location of Well (Footage, Sec., T., R., M., or Survey Description) 		30-015-22900 10. Field and Pool, or Exploratory Area Cemetery (Morrow)
		11. County or Parish, State
1835' FNL & 1980' FEL Unit G, Sec. 5, T21S, R24E		Eddy County, New Mexico
12. CHECK APPROPRIATE BO	X(s) TO INDICATE NATURE OF NOTICE, REPOR	T, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent		Change of Plans
Subsequent Report	Recompletion Plugging Back Casing Repair	New Construction Non-Routine Fracturing Water Shut-Off
Final Abandonment Notice	Altering Casing X Other Operator Name Change	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form 1
	all pertinent details, and give pertinent dates, including estimated date of starting rtical depths for all markers and zones pertinent to this work.)*	
Changing operator name from effective January 1, 1996.	BARBARA FASKEN to FASKEN OIL AND RANCH,	
Rider to Federal bond was f	iled in Santa Fe, New Mexico, in Recember	envêd D
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14. I hereby curtify that the foregoing a true and correct Signed Amma Mullion At (This space for Federal by State office use)	Jimmy W. Davis, Jr. Operations Manager	January 26, 1996
Approved by Conditions of approval, if any:	Title	Date
Title 18 U.S.C. Section 1001, makes it a crime for any pers or representations as to any matter within its jurisdiction.	on knowingly and willfully to make to any department or agency of the United *See Instruction on Reverse Side	States any false, fictitious or fraudulent statements