

Form 3160-5 RECEIVED
(June 1990)

NM OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

C/SF

OCT 7 11 27 AM '93

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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
SNOW OIL & GAS, INC. ✓

3. Address and Telephone No.
P.O. BOX 1277 ANDREWS, TEXAS 79714 (915) 524-2371

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FNL & 990' FWL Sec. 4, T-24-S, R-26-E

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993
5. Lease Designation and Serial No.
NM 90514
6. If Indian, Allottee or Tribe Name
7. If Unit or CA, Agreement Designation
8. Well Name and No.
Aspen Federal #1
9. API Well No.
30-015-21605
10. Field and Pool, or Exploratory Area
WILDCAT DELAWARE
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

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other ADDRESS CHANGE
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ 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.)*

ADDRESS CHANGE FOR OPERATOR ON THE ABOVE REFERENCED WELL

ACCEPTED FOR RECORD
R
27 1993
CARLSBAD, NEW MEXICO

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

Signed [Signature] Title Vice President Date 10/06/93

(This space for Federal or State office use)

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

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 as to any matter within its jurisdiction.

*See Instruction on Reverse Side