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N.M. Oil Cons. Division
811 S. 1st Street
Artesia, NM 88210-2935

FORM APPROVED
Bureau No. 1004-0135
Expires March 31, 1993

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

5. Lease Designation and Serial No.
NM0475051

6. If Indian, Allottee or Tribe Name

N/A

7. If Unit or CA, Agreement Designation

N/A

8. Well Name and No.
Wadi 9 Federal No. 1

9. Well API No.
30-015-29659

10. Field and Pool, or Exploratory Area
Black River, Delaware W.

11. County or Parish, State

Eddy County, New Mexico

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Mallon Oil Company

3. Address and Telephone No.

P.O. Box 3256, Carlsbad, NM 88220 (505) 885-4596

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2080' FSL and 660' FWL (NW SW) Unit L
Sec. 9, T24S-R26E

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

TYPE OF SUBMISSION

TYPE OF ACTION

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

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other: Change well name

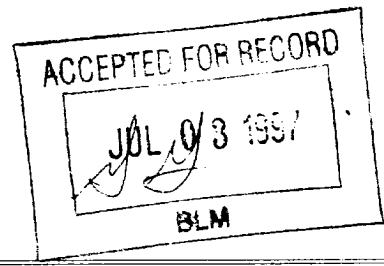
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(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 zone.)*

The above referenced well's name will be changed as follows: Wadi 9 Federal No. 1

Part 10-3
7-11-97
chg well name



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

Signed

Theresa A. McAndrews

Title

Office Manager

Date

6-30-97

(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 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