UNITED STATES  DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY	5. LEASE SF-080136 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir, Use Form 9-331-C for such proposals.)	7. UNIT AGREEMENT NAME  8. FARM OR LEASE NAME
1. oil gas well other  2. NAME OF OPERATOR SIMS OIL COMPANY, INC.  3. ADDRESS OF OPERATOR BOX 1097, FARMINGTON, N. M.  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below 1550' FSL & 880' FWL Sec. 34, 25N,6W AT SURFACE: AT TOP PROD. INTERVAL: AT TOTAL DEPTH-Same  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) Cperator Name Change  17. DESCRIBE PROPOSED OR COMPLETED OPERATION: (Clearly state including estimated date of starting any croposed wc k. If well is dimeasured and true vertical cepths for all markers and zones pertinent Change name of operator from Kimbell Change name of operator from K	9. WELL NO.  2  10. FIELD OR WILDCAT NAME  Ballard Pictured Cliff's  11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  Sec. 34, T25N, R6W  12. COUNTY OR PARISH 13. STATE  Rio Arriba N. M.  14. API NO.  15. ELEVATIONS (SHOW DF. KDB, AND WD)  6383 GR  (NOTE: Report results of multiple completion or zone change on Form 9-330.)  SUT FY  Me all pertinent details, and give pertinent dates, rectionally drilled, give subsurface locations and to this work.)*
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	Agantum 1 10 02
(This space for Federal or State off)	
APPROVED BY	COREPTED FOR RECORD

JUN 23 1983

\*See Instructions on Reverse Side

