

UNITED STATES **N.M. Oil Cons. Division**
 DEPARTMENT OF THE INTERIOR **911 S. 1st Street**
 BUREAU OF LAND MANAGEMENT **Artesia, NM 88210-2834**

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

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 type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other 2. Name of Operator Kaiser-Francis Oil Company 3. Address and Telephone No. P. O. Box 21468, Tulsa, OK 74121-1468 918-491-4314 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SW SE (660' FSL & 2310' FEL) of Sec. 7-24S-29E	5. Lease Designation and Serial No. --- 6. If Indian, Allottee or Tribe Name --- 7. If Unit or CA, Agreement Designation NMNM-82104 8. Well Name and No. Fort 7 #1 9. API Well No. 30-015-25658 10. Field and Pool, or Exploratory Area Malaga (Atoka) 11. County or Parish, State Eddy/NM
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12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <u>Change of operator</u>	<input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water <small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</small>

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.)*

Effective 12/15/99, Kaiser-Francis Oil Company took over operations of the above well from Hallwood Petroleum, Inc.

Be advised that Kaiser-Francis Oil Company is considered to be the operator on the above-described lands and is responsible under the terms and conditions of the lease for the operations conducted on the leased lands or portions thereof. Bond coverage for this well is provided by Kansas City Fire & Marine Insurance Company, No. YPBNS1315279.

14. I hereby certify that the foregoing is true and correct		
Signed <u>C. Jan Beckenberry</u>	Title <u>Charlotte Van Valkenburg Technical Coordinator</u>	Date <u>12/23/99</u>
<small>(This space for Federal or State office use)</small>		
Approved by <u>Mary Lou Ormseth</u>	Title <u>Supervisor</u>	Date <u>12-23-99</u>
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, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.