Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED Budget Bureau No. 1004-0135

	VI OF THE INTERIOR	Expires: March 31, 1993
BUREAU OF LAND MANAGEMENT		5. Lease Designation and Serial No.
		NM-50415
SUNDRY NOTICES AND REPORTS ON WELLS		6. If Indian, Allottee or Tribe Name
Do not use this form for proposals to di	rill or to deepen or-reentry to a different reservoir.	7.4
	R PERMIT—" for such proposals	
		7. If Unit or CA, Agreement Designation
SUBMIT IN TRIPLICATE		7. If One of CA, Agreement Designation
1. To 2. W-0		
1. Type of Well Oil Gas		8. Well Name and No. 18395
X Oil Gas Well Other		100.5
2. Name of Operator		West King Camp Unit #1
Manzano Oil Corporation		9. API Well No.
3. Address and Telephone No.		30-005-63076
P.O. Box 2107, Roswell, NM 88202-2107 (505) 623-1996		10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		South Lone Wolf Devonia
182'FNL & 507'FWL		11. County or Parish, State
Sec 26, T13S, R29E		
	11A47 D	Chaves
CHECK APPROPRIATE BOY	(s) TO INDICATE NATURE OF NOTICE, REPO	<u> </u>
12. CHECK APPROPRIATE BOX	S) TO INDICATE NATURE OF NOTICE, REPOR	RI, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Π., .	
	Abandonment	Change of Plans
	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	X Other Name Change	_ Dispose Water
		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
	Il pertinent details, and give pertinent dates, including estimated date of starting cal depths for all markers and zones pertinent to this work.)*	g any proposed work. If well is directionally drilled,
The well name needs to be ch	anged from the McClellan Federal #1 to	o the West King Camp
Unit #1 due to adoption of f	ederal unit (per verbal instructions	of Armando Lopez).
		1. Service
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	·	Section 1
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	S. Orlinson	
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		2-9-96
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14. I hereby certify that the foregoing is true and correct		2-9-96
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14. I hereby certify that the foregoing is true and correct Signed Allwan de (This space for Federal or State office use)		Pat ID-3 2-9-96 will name

Approved by 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 agen Biffage United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction. or representations as to any matter within its jurisdiction. *See Instruction on Reverse Side