Form 3160-5	OCD-POBBS	
(June 1990) UNITED STATES		CORM APPROVED
DEPARTMENT OF THE INT		Budget Bureau No. 1004-0135
OCT 1 A BUREAU OF LAND MANAG		Expires: March 31, 1993 5. Lease Designation and Serial No.
Do not use this FURST NOT ICES AND REPORTS	S ON WELLS	6. If Indian, Allottee or Tribe Name
Do not use this form for proposals to drill or to deepen or reentry		and a second sec
to a different reservoir. Use 'APPLICATION FOR PERMIT"		t r
for such proposals		
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
		8910115870
1. Type of Well		
X Oil Gas Well Well X Other		
		8. Well Name and No.
2. Name of Operator		Langlie Jal Unit - See attached for Well No.s
Ranger 40 Petroleum LLC		
		9. API Well No.
2. Address	T-1	See attached
200 N. Loraine St. Suite 330, Midland, TX 79701	Telephone No.	
200 N. Loranie St. Suite 550, Midland, 1X 79701	239-254-0004	10. Field and Pool, or Exploratory Area
3. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)		Langlie Mattix; 7Rvrs-Q-Grayburg
See Attached		, and composing
		11. County or Parish, State
		Lea, NM
12 CHECK APPROPRIATE DOV() TO DIDIC .		
12. CHECK APPROPRIATE BOX(s) TO INDICATE	E NATURE OF NOTICE, RE	PORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTIO	DN
Notice of Intent Abandon Recompt Recompt	ment	Change of Plans
X Subsequent Report		New Construction
Casing R	epair	Non-Routine Fracturing Water Shut-Off
Final Abandonment Notice	Casing	Conversion to Injection
X Other	Change of Operator	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 particulated described)		
13. Describe Proposed or Completed Operations (Clearly state all pertinent details If well is directionally drilled, give subsurface locations and measured and true	s, and give pertinent dates, including estimated e vertical depths for all markers and zones pert	date of starting any proposed work.
Change of Operator Effective 6/1/08	ere bet an markers and zones per	timent to this work.)*
change of Operator Effective 0/1/08		
As required by 43 CEP 3100 0 5(a) and 43 CEP 3		
As required by 43 CFR 3100.0-5(a) and 43 CFR 3 referenced well.	162.3, we are notifying you c	of a change of operator on the above
We as now encertain the state of the		
We, as new operator, accept all applicable terms, of conducted on the lease or portion of lease described	conditions, stipulations and re	strictions concerning operations
conducted on the lease or portion of lease describe	ed.	g operations
BLM Bond File No. NMB000551		M PRINTO
	/	
	/	
SEP 1 3 2008		SEP 1
		- 3 2008
14. I hereby certify that the foregoing is true and correct		
Control of the second s		OUREAU OF LAND
Signed Deletre MKeler Title Debbie Mck	1	
	elvev. Agent Date 0/2/08	CARLSBAD FUT MANAGEMAT
(This space for Federal or State office use)	elvey, Agent Date9/3/08	CARLSBAD FIELD OFFICE
(This space for Federal or State office use) Approved by Title	<u>elvey, Agent</u> Date <u>9/3/08</u>	BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE

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