Form Approved. Budget Bureau No. 42-R1424

UNITED STATES

Drawer DD

5. LEASE 88210 NM-0108997-B

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME FARRELL FEDERAL

10. FIELD OR WILDCAT NAME

CHAVEROO SAN ANDRES

12. COUNTY OR PARISH 13. STATE

11. SEC., T., R., M., OR BLK. AND SURVEY OR

15. ELEVATIONS (SHOW DF, KDB, AND WD)

SEC.28, T.7 S., R.33 E.

J. 4 L.

NEW MEXICO

9. WELL NO.

AREA

14. API NO.

ROOSEVELT

4432

DEPARTMENT OF THE INTERIORATTESIA, NM **GEOLOGICAL SURVEY**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS	ON	WELLS
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(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.)

gas well X well other 2. NAME OF OPERATOR

CHAVEROO OPERATING COMPANY, INC.

3. ADDRESS OF OPERATOR P.O. DRAWER 1599, LOVINGTON, NEW MEXICO 88260

4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17

1980'FSL & 1980'FWL OF SEC. 28 AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA

OF OPERATOR

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE

REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE

CHANGE ZONES ABANDON* (other)

SUBSEQUENT REPORT OF:

(NOTE: Report results of multiple comp change on Form 9-3300 1383

17. 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.)*

THIS IS NOTICE OF CHANGE OF OPERATOR OF ABOVE DESCRIBED WELL

FROM: JOE E. BROWN P. O. BOX 543

LOVINGTON, NEW MEXICO 88260

CHAVEROO OPERATING COMPANY, INC. T0:

P. O. DRAWER 1599

LOVINGTON, NEW MEXICO 88260

Subsurface Safety Valve: Manu. and Type __ Set @ ____ Ft. DEC 22 1983 certify wat the foregoing is true and correct DATE Agent PROVED (This space for Federal or State office use) TER W. CHESTERITLE APPROVED BY _____ DATE ___ CONDITIONS OF APPROVAL, IF ANY

DEC 23 1983



RECEIVED

DEC 28 1983

10080 G. 100