AT TOP PROD. INTERVAL:

NM OIL CONS. COMMISSION

Drawer DD

Form Approved. Budget Bureau No. 42-R1424

NEW MEXICO

UNITED STATES Artesia, NM & DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	NM-0108997-B 6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME		
(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.)	8. FARM OR LEASE NAME FARRELL FEDERAL		
1. oil XX gas other 2. NAME OF OPERATOR	9. WELL NO. 18		
CHAVEROO OPERATING COMPANY, INC. 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME CHAVEROO SAN ANDRES		
P.O. DRAWER 1599, LOVINGTON, NEW MEXICO 88260 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA SEC.28, T.7 S., R.33 E.		
AT SURFACE: 1310'FNL & 2630'FEL OF SECTION 28	12. COUNTY OR PARISH 13. STATE		

AT TOTAL DEPTH: 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, B. AND WD)

REPORT, OR OTHER DATA		4401.4 GL
REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:	6
TEST WATER SHUT-OFF		
FRACTURE TREAT	Ш	
SHOOT OR ACIDIZE		
REPAIR WELL		(NOTE: Report wills of multiple com
PULL OR ALTER CASING		change on Form 9-330.)
MULTIPLE COMPLETE		DEC 23
CHANGE ZONES		-043
ABANDON*	CDATOR [,
(other) CHANGE OF OP	EKATUK	CIL & GAL

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, with give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface/perations and measured and true vertical depths for all markers and zones pertinent to this work.)*

PERMIT TO DRILL THE ABOVE DESCRIBED WELL HAS BEEN APPROVED BUT OPERATIONS HAVE NOT THIS NOTICE IS TO CHANGE THE OPERATOR OF THE PROPOSED WELL COMMENCED.

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

LOVINGTON, NEW MEXICO 88260

TO: CHAVEROO OPERATING COMPANY, INC.

ROOSEVELT

P.O. DRAWER 1599

LOVINGTON, NEW MEXICO 88260

CHAVEROO OPERATING COMPANY, INC. IS FAMILIAR WITH THE PERMIT TO DRILL AS APPROVED AND WILL COMPLY WITH THE TERMS AND CONDITIONS OF APPROVAL. THE COMPANY REPRESENTATIVE IS:

WILLIAM J. GRAHAM

4800 SAN FELIPE, SUITE 620

HOUSTON, TEXAS 77056 TELEPHONE: 713-627-2875

Subsurface Safety Valve: Manu. and Type		Set @	Ft
18. I hereby certify that the foregoing is true and correct SIGNED Arthur R. Brown	_ DATE	DEC 22 1983	
APPROVED BY Onig. Dg PETER W. CHESTER CONDITIONS OF APPROVAL, IF ANY:	e) DAT	E	

DEC 23 1983

DEC 8.7 1983
O. C. E.
ASTESSIA, OFFICE

RECEIVED

DEC 28 1983

HOLLS CANCE