N. M. ST. PUID BUNINSSION

UN ED STATES SUBMIT IN TRIPLE DEPARTMENT OF THE INPERIOR WEST STRIPLE OF THE INPERIOR WEST STRIPLES Form 9-331 (May 1963) Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY LC-069051 6. IF INDIAN, ALLOTTEE OR TRIBE NAME SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.

Use "APPLICATION FOR PERMIT—" for such proposals.) 7. UNIT AGREEMENT NAME WELL X GAS WELL NAME OF OPERATOR 8. FARM OR LEASE NAME McAlester Fuel Company New Mexico "A" Federal 3. ADDRESS OF OPERATOR 9. WELL NO. P. O. Drawer 3546, Midland, TX LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface 10. FIELD AND POOL, OR WILDCAT Gladiola Devonian 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 660' from south line and 1980' from east line Sec. 6, 125, R 78 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR PARISH 13. STATE 14. PERMIT NO. 3873.7 GR. New Mexico 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF : PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL MULTIPLE COMPLETE ALTERING CASING FRACTURE TREAT FRACTURE TREATMENT SHOOT OR ACIDIZE SHOOTING OR ACIDIZING REPAIR WELL CHANGE PLANS (Note: Report results of multiple completion on Well ('ompletion or Recompletion Report and Log form.) Change of Operator 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.)* Name of operator changed from McAlester Fuel Company, effective 1/1/83 to: ENSTAR Petroleum, Inc. P. O. Drawer 3546 Midland, TX 79702 DIL 8 053 MINERALS MONT, SHRYICE ROSWELL, NEW MEXICO 18. I hereby certify that the foregoing is true and correct DATE __1/20/83 Administrative Supervisor SIGNED 🔼 (This space for Federal A street Levisto APPROVED BOLD PETER W. CHESTER DATE CONDITIONS OF APPROVAL, IF ANY: 1 1983 MAR JAMES A. GILLHAM *See Instructions on Reverse Side

DISTRICT SUPERVISOR