Submit 3 Copies To Appropriate District State of New Mexic				
District I 1625 N. French Dr., Hobbs, NM 88240 Energy, Minerals and Natural	Resources Revised March 25, 1999 WELL API NO.			
District II OIL CONCERVATION D	JUISION 30-025-31848			
District III 1220 South St. Franci	5. Indicate Lyne of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 8750	6. State Oil & Gas Lease No.			
1220 S. St. Francis Dr., Santa Fe, NM 87505	V2999			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG	7. Lease Name or Unit Agreement Name:			
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR S PROPOSALS.)				
1. Type of Well:				
Oil Well Gas Well Other 2. Name of Operator	7. Well No.			
H.L. Brown Operating, L.L.C.	7. wen No.			
3. Address of Operator	8. Pool name or Wildcat			
P.O. Box 2237, Midland, TX 79702 4. Well Location	Feather Morrow			
Init Letter II . 1660 fort from the TDU				
Unit Letter H1650 feet from the FNL	line and990 feet from theFEL line			
Section 16 Township 15S	Range 32E NMPM County Lea			
10. Elevation (Show whether DR, 1 4297.9 GL	KKB, KI, GR, etc.)			
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
PERFORM REMEDIAL WORK PLUG AND ABANDON	EMEDIAL WORK			
TEMPORARILY ABANDON CHANGE PLANS C	OMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
— — — — — — — — — — — — — — — — — — — —	ASING TEST AND			
OTHER:	THER:			
12. Describe proposed or completed operations. (Clearly state all pertine	at details, and give pertinent dates, including estimated date of			
starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.				
Reorganization – Effective June 1, 2001, change name of company from H.L. Brown, Jr. to:				
H.L. Brown Operating, L.L.C.				
P.O. Box 2237 Midland, TX 79702				
915/683-5216				
NEW OGRID: 213179				
	1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 -			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE GANY Me JARK TITLE Ope	rations ManagerDATE6/21/02			

Type or print hame Jerry M. Jordan		Telep	phone No. 915/683-5216
(This space for State use)		ORIGINAL SIGNED BY	JUN 2 5 2002
APPPROVED BY	TITLE	DALLE KAULA	DATE
Conditions of approval, if any:		PETROLEUM ENGINEER	

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