

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N. M. OIL CONS. COMMISSION

P. O. BOX 1980
HOBBS, NEW MEXICO 88249

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
NMNM53380

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Caviness 10 Federal #6

9. API Well No.

30-025-30311

10. Field and Pool, or Exploratory Area
Mescalero Escarpe Bon

11. County or Parish, State
Lea Spri

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other TA

2. Name of Operator

Floyd Operating Company

3. Address and Telephone No.

711 Louisiana, Suite 1740, Houston, TX 77002

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2026' FSL & 1961' FEL, Section 10, T18S, R33E

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Change of Operator
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ 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 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.)

- Floyd Operating Company purchased the Caviness 10 Federal No. 1 from Bison Petroleum Corporation effective January 1, 1996.
- Floyd Operating Company accepts responsibility of all operations.
- Attachment: Bond Coverage

HOBBS INSPECTION OFFICE
ACCEPTED FOR RECORD

DATE 4-29-96

SIGNATURE URB

BUREAU OF LAND MANAGEMENT
HOBBS, NM

APR 29 1 42 PM '96

RECEIVED

14. I hereby certify that the foregoing is true and correct

Signed

Title Manager Of Production

Date

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: