N.M. Oil Cone Division

Form 3160-5	UNITED STA	ATES P.O. Box 198	86 📆 📇 🦠 (**)	FORM APPROVED
(June 1990)	DEPARTMENT OF TI	HE INTERIORIODES, NM (8824	Budget Bureau No. 1004-0135 Expires: March 31, 1993
	BUREAU OF LAND M			5. Lease Designation and Serial No.
			Ann 10 10	N/20 ALM 10077
SUNDR	RY NOTICES AND RE	EPORTS ON WELLS	APR 18 10 39	HIT Indiah, Allottee or Tribe Name
Do not use this form for pr	roposals to drill or to o	deepen or reentry to a dif	ferent reservoir.	Will hadd, Another of Thos Name
		T—" for such proposals	BUREAU	
	SUBMIT IN TRII	PLICATE	HUEBS, I	7. If Unit or CA, Agreement Designation
		- LICATE		
I. Type of Well Oil Gas				
Weil Weil Other				8. Well Name and No.
2. Name of Operator	Emilia sala	1 6000		Kenney #1
	Eunice Wel	Service		9. API Well No.
3. Address and Telephone No.	la Ray soon o	1) h 002	7/	30025024870051
4 Lossies of Well (Ferry S	U DON 880 EL	unice, NM. 882.	31	10. Field and Fool, or Exploratory Area
4. Location of Well (Footage, Sec., T., F	K. n n や y 世し	NW NW 534 T2	05 K34E	Lynch Yates 7 Kivers
•	660 FNL	30		
	Lea			
12. CHECK APPROP	RIATE BOX(s) TO IN	DICATE NATURE OF 1	NOTICE, REPOR	T, OR OTHER DATA
TYPE OF SUBMISSION	ON		TYPE OF ACTION	
Notice of Intent		Abandonment		Change of Plans
_		Recompletion		New Corstruction
Subsequent Report		Plugging Back		Non-Rou ine Fracturing
		Casing Repair		Water Shut-Off
Final Abandonment No	otice	Altering Casing		Conversion to Injection
		Other		Dispose Water
				(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
 Describe Proposed or Completed Operat 	tions (Clearly state all pertinent detr	ails, and give pertinent dates, including	estimated date of starting a	ny proposed work. If well is directionally drilled.
give subsurface locations and meas	sured and true vertical depths for	all markers and zones pertinent to this	s work.)*	

Change of Operator From Dan Berry to Eunice Well Service effective 3-1-96

14. I hereby certify that the foregoing of true and sorrect Signed	4	Mor		3-19-9/
(This space for Federal or State office use)	Title	Angelor very light	Date	2 11 10
Approved byConditions of approval, if any:	Title		_ Date _	

or representations as to any matter within its jurisdiction.