ITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*

Budget Bureau No. 1004-0135
Expires: August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
NM-011827

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

1. OIL WELL X GAS WELL OTHER

2. NAME OF OPERATOR
Chance Properties

8. FARM OR LEASE NAME
Federal 20

3. ADDRESS OF OPERATOR
c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241

9. WELL NO.
1

4. 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
Jalmat

990' FSL & 2310' FWL of Sec 20

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 20 T23S R36E

14. PERMIT NO.
API #30-025-28410

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3158 GR

12. COUNTY OR PARISH
Lea

13. STATE
NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	PULL OR ALTER CASING
FRACTURE TREAT	MULTIPLE COMPLETE
SHOOT OR ACIDIZE	ABANDON*
REPAIR WELL	CHANGE PLANS
(Other)	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREATMENT	ALTERING CASING
SHOOTING OR ACIDIZING	ABANDONMENT*
(Other) Change Operator	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

Filed to change operator from Bill & Linda Lewallen effective 1/1/91.

Attached is copy of irrevocable letter of credit filed with BLM, Santa Fe this date.

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

SIGNED Victoria Dalla TITLE Agent DATE 2-14-91

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.