

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N. M. OR. CONS. COMMISSION
P. O. BOX 1100
SANTA FE, NEW MEXICO 87501

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

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	5. Lease Designation and Serial No. NM NM - 1945-0
2. Name of Operator Adams Oil & Gas	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 901 E Dallas Kermit Texas 79745	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SEC 17 + 40th N 17-235-33E Unit D	8. Well Name and No. FEDERAL #2
	9. API Well No. 30025286670051
	10. Field and Pool, or Exploratory Area CRAZ Del Norte
	11. County or Parish, State Lee New Mexico

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

TYPE OF SUBMISSION	TYPE OF ACTION
☒ Notice of Intent	☐ Abandonment
☐ Subsequent Report	☐ Recompletion
☐ Final Abandonment Notice	☐ Plugging Back
	☐ Casing Repair
	☐ Altering Casing
	☐ Other
	☒ 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.)*

*Electrical Repairs - Also repair Downhole Equipment
turn back to production*

10-03-95

OCT 11 1995
accepted for record
URB

BUREAU OF LAND MANAGEMENT
OCT 31 523 PM 1995
OCT 31 1995

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

Signed <i>Stanley Adams Jr.</i>	Title <i>Operator</i>	Date <i>9-2-95</i>
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(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: