

(JUNE 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED

Budget Bureau No. 1004-0135

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	7. If Unit or CA, Agreement Designation
2. Name of Operator CHANCE TOOL LTD	8. Well Name and No. LA MUNYON FED #1
3. Address and Telephone No. c/o OIL REPORTS & GAS SERVICES, INC. 1008 W. BROADWAY, HOBBS, NM 88240 505/393-2727	9. API Well No. 30-025-10813
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FSL & 660' FWL, SECTION 21, T23S, R37E	10. Field and Pool, or Exploratory Area LANGLIE MATTIX SR-QU-GB
	11. County or Parish, State LEA CO., NEW MEXICO

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>CHANGE OF OPERATOR NAME</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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.)

As required by 43 CFR 3100.05 (A) and 43 CFR 3162.3 we are notifying you of a Change of Operator on the above lease. Chance Tool LTD, as operator, accepts all applicable terms, conditions, stipulations and restrictions concerning operations conducted on the lease or portion of the lease described thereof.

Bond Coverage: \$25,000.00 Statewide Bond

Bond Number: RLB0004565

Effective Date: July 11, 2002

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

Signed <u>DAVID R. GLASS</u>	Title <u>AGENT</u>	Date <u>08/23/02</u>
(This space for Federal or State office use)		
Approved by <u>DAVID R. GLASS</u>	Title	Date
Conditions of approval <u>001 8 2002</u>		
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 State any false, fictitious or fraudulent statement or report which is material in any matter within jurisdiction.		
PETROLEUM ENGINEER		