FORM 3160-5 (JUNE 1990)

NITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

1.M.	Oil Co	APPROYED	/ision
1625	Budget Burea Fre Expires M	nch Di	135
Hobbs	Expires M	arch 31, 1993	

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		L. C - 0 3 0 1 8 7 6. If Indian, Allottee or Tribe Name	
	SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designation	
1. Type of Well X Oil Well Gas Well Other		Well Name and No.	
2. Name of Operator		LA MUNYON FED #2	
CHANCE TOOL LTD		9. API Well No.	
Address and Telephone No.			
c/o OIL REPORTS & GAS SERVICES, INC. 1008 W. BROADWAY, HOBBS, NM 88240 505/393-2727		30-025-10814	
4. Location of Well (Footage, Sec., 7	T., R., M., or Survey Description)	10. Field and Pool, or Exploratory Area	
		LANGLIE MATTIX SR-QU-GB 11. County or Parish, State	
1980' FNL & 660' FWL, SEC	1980' FNL & 660' FWL, SECTION 21, T23S, R37E		
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		LEA CO., NEW MEXICO	
12. CHECK APPROPRIATE	BOX(s) TO INDICATE NATURE OF NOTICE, RE	PORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans	
Subsequent Report	Recompletion	New Construction	
Cubsequent (Veport	Plugging Back		
Final Abandonment Notice	Casing Repair	Non-Routine Fracturing	
		Water Shut-Off	
	Altering Casing	Conversion to Injection	
	X Other CHANGE OF OPERATOR NAME	Dispose Water	
13. Describe Proposed or Completed Operat	ions (Clearly state all pertinent details and give pertinent dates, including estin	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form).	
If well is directionally drilled, give subsur	face locations and measured and true vertical depths for all markers and zo	nated date of starting any proposed work. nes pertinent to this work.)*	
As required by 43	CFR 3100.05 (A) and 43 CFR 3162.3 we are notify		
Change of Operat	or on the above lease. Chance Tool LTD, as opera	/ing you of a	
all applicable term	is, conditions, stipulations and restrictions concerning	ng operations	
conducted on the	lease or portion of the lease described therof.	ing operations	
	\$25,000.00 Statewide Bond		
- sur_ coverage. V	220,000.00 Glatewide Bolid		
Bond Number: RL	_B0004565		
Effective Date: Ju	ıly 11, 2002		
14. I hereby certify that the foregoing is true an	d correct		
the struck			
Signed This space of Federal August 1997	Title AGENT	DateDate	
This space for Federal of State office user V	AVID R. GLASS		
Approved by OHIG. SGD.) L	Title	Date	
Conditions of approval, if any OCT 8 20	002		
itle 18 U. S. C. Section 1001, makes it a crime	for any person knowingly and willfully be		
audulent statement or representations as to a DAVID R. GLA	ny matter within jurisdiction.	of the United State any false, fictitious or	
PETROLEUM ENC	BINEER		