

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED

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N.M. Oil Cons. Division  
Budget Bureau 10040101  
1625 N. French Dr.  
exp. 6/30/1999  
Please Designation and Serial No.  
Hobbs, NM 88240  
JC-030187

## 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 ☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

CHANCE TOOL LTD

3. Address and Telephone No.

c/o OIL REPORTS & GAS SERVICES, INC. 1008 W. BROADWAY, HOBBS, NM 88240 505/393-2727

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FNL &amp; 1980' FWL, SECTION 21, T23S, R37E

6. If Indian, Allottee or Tribe Name

7.	If Unit or CA, Agreement Designation
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8. Well Name and No.

LA MUNYON FED #4

9. API Well No.

30-025-10816

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"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<div> <input type="checkbox"/> Abandonment  <input type="checkbox"/> Recompletion  <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> </div> <div> <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           </div>

(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.)\*

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 therof.

**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 [Signature] Title AGENT Date 08/23/02

(This space for Federal or State office use)

Approved by (ORIG. SGD.) DAVID R. GLASS  
Conditions of approval: 8 2002

6-65  
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 representation as to any matter within jurisdiction.

PETROLEUM ENGINEER