

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
N.M. ON CONS. COMMISSION  
P.O. BOX 1980  
DOHBS NEW MEXICO 88240  
FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993  
SEP 22 11 42 PM '95

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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NMNM 7951
2. Name of Operator PermOk Oil, Inc.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 816-756-5166 4050 Pennsylvania Suite 340, Kansas City, MO 64111	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) NWSE 11-26S-37E   1650 FSL & 2310 FEL	8. Well Name and No. Glenn Ryan 02
	9. API Well No. Glenn Ryan 30025119 7000S1
	10. Field and Pool, or Exploratory Area Queen Zone
	11. County or Parish, State Lea County, N.M.

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent  <input type="checkbox"/> Subsequent Report  <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input type="checkbox"/> Other	<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 <small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</small>

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 measure and true vertical depths for all markers and zones pertinent to this work.)\*

We plan to resume production by January 1, 1996 on a primary basis.

APPROVAL IS NOT REQUIRED.  
RECORDED FOR RECORD  
OCT 2 1995  
CARLSBAD, NEW MEXICO

RECEIVED  
OCT 02 1995  
DIST. 6 N.M.  
Carlsbad, New Mexico

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

Signed Russell M. Stearns Title President Date 9-22-95

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Conditions of approval, if any:

