c|SF

Form 9–331
Dec. 1973

NM OIL CONS. COMMISSION
Drawer DD
UNITED STATES Artesia, NM 88210
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42–R1424

5. LEASE
LC-049998 A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)

1. oil well [X]   gas well [ ]   other

RECEIVED BY
SEP 29 1986
O. C. D.
ARTESIA OFFICE

2. NAME OF OPERATOR
Ray Westall

3. ADDRESS OF OPERATOR
P.O. Box 4   Loco Hills, NM 88255

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)   2310'/N & 990'/E
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

8. FARM OR LEASE NAME
V.L. Foster

9. WELL NO. 2, 3, 4, 6, 7

10. FIELD OR WILDCAT NAME
Fren 7RVS & G-J-7RVS-Q-G-SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
17-17S-31E

12. COUNTY OR PARISH   Eddy
13. STATE   NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

(NOTE: Report results of multiple completion or zone change on Form 9–330.)

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF [ ]   [ ]
FRACTURE TREAT [ ]   [ ]
SHOOT OR ACIDIZE [ ]   [ ]
REPAIR WELL [ ]   [ ]
PULL OR ALTER CASING [ ]   [ ]
MULTIPLE COMPLETE [ ]   [ ]
CHANGE ZONES [ ]   [ ]
ABANDON* [ ]   [ ]
(other)_____

17. 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.)*

The V. L. Foster is a producing lease. These wells were purchased from Sun Exploration & Production Company in 1982 and Ray Westall is operator.

Fren Seven Rivers

2J 17 17S 31E
4J 17 17S 31E
7J 17 17S 31E

Grayburg Jackson 7RVS-Q-G-SA

3H 17 17S 31E
6G 17 17S 31E   All wells produce into same battery

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED _Ray Westall_   TITLE _Operator_   DATE _9-10-86_

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

SEP 24 1986

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO