Form 3	180-5
JUNE	1990)

## UNITED STATES ALL OIL CONS. Division

FORM APPROVED

Budget	Bureau	No.	1004-0

Budget	Bureeu	No.	1004-0

Budget	Bureeu	No.	1004-013

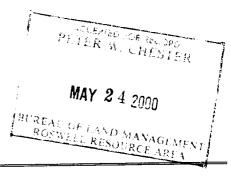
DEPARTMENT OF THE INTERIOR	Budget Bureeu No. 1004-0135	C19
BUREAU OF LAND MANACAMENS. 1st S!:39t	Expires March 31, 1993	
SUNDRY NOTICES AND REPORT Apteria, SNM 88210-283	5. Lease Designation and Senal No. LC-060529	
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  Use "APPLICATION FOR PERMIT" for such proposals.	8. If Indian, Allottee or Tribe Name	
Use APPLICATION FOR FERMINE TO COMPANY	7 If Unit or CA Agreement Designation	

Use "APPLICATION FOR PE	RMIT" for such proposals.	
	(32.23.24.5)	
SUBMIT IN TRIPLICA	TE STATE	7. If Unit or CA, Agreement Designation
Type of Well	1 22	
Name of Operator Shahara Oil, LLC	12 1/25 Chillip 38	Weil Name and No.     Beeson "F" Federal No. 27
3. Address and Telephone No. 207 W. McKay, Carlsbad, NM 88220	ARIANA WED	9. Well API No. 30-015-30016
505-885-5433	10/4	10. Field and Pool, or Exploratory Area  Loco Hills QN-GB-SA
4 Location of Well (Footage, Sec., T., R., M., or Survey Description)	C1681332	11. County or Pansh, State
1015' FNL & 1524' FEL, Unit B Section 31-T17S-R30E		Eddy County, New Mexico
CHECK APPROPRIATE BO	X(s) TO INDICATE NATURE OF NOTICE, RE	EPORT, OR OTHER DATA
TYPE OF SUBMISSION		TYPE OF ACTION
Notice of Intent	Abandonment	Change of Plans  New Construction
X Subsequent Report	Recompletion Plugging Back	Non-Routine Fracturing
Final Abandonment Notice	Casing Repair  Altering Casing	Water Shut-Off  X Conversion to Injection
- I - Academic No.	Other	Cispose Water
		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form )

03/30/00 Installed BOP. RIH w/5 1/2" 17# coated tension pkr, 97jts new 2 3/8" plastic coated (TK-70) tbg to 2765'.

03/31/00 Circulated pkr fluid. Set pkr @ 2765'. Tested annulus to 350psi for 30min - held good.

04/21/00 Initiated injection under OCD order No's R-11027& R-11027-A @ 150 BWPD @ 200psi.



			ROSWELL RESE	MANAGEMENT DURCE AREA	
igned Malife foreografic true and correct	т,	itle Agent		Date <u>05/15/00</u>	_
Thallia Marshall ( THIS SPACE FOR FEDERAL OR STATE OFFICE USE)					
Approved By Conditions of approval, if any:	Tille		Date	<u> </u>	
		or of the United States any f	aise, fictitious or fraudulent statements or representati	ons as	=

<sup>13.</sup> 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 zone.)\*