

N.M. OIL CONS. COMMISSION  
BOX 1980  
HOBBS, NEW MEXICO 88240

Form 3160-5  
(June 1990)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

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. NM - 0175774
2. Name of Operator Shackelford Oil Co.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Box 10665, Midland, TX 79702, (915)682-9784	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 678' FSL and 1992' FWL Sec 21 T19S R32E	8. Well Name and No. Lynch
	9. API Well No. #3 3002500916
	10. Field and Pool, or Exploratory Area East Lusk Yates
	11. County or Parish, State Lea, NM

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"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water
		(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.)

Attempted to complete in Seven Rivers formation as follows

Open Hole  
10/24/95 Perf. 2772'-2778'  
10/26/95 Acidized w/1000 gallons of acid. Swabbed and recovered black water  
10/27/95 Plugged back to 2766'  
10/31/95 Perforate 2751'-2760'  
Acidize w/1000 gallons of acid.  
Swabbed well dry with 5% oil cut.  
12/23/95 Reacidized w/750 gallons of acid. Swabbed 5% oil cut swabbed dry

HOBBS INSPECTION OFFICE  
ACCEPTED FOR RECORD

DATE 4-22-96

SIGNATURE URB

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

Signed D. Shackelford Title \_\_\_\_\_ Date \_\_\_\_\_  
(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any: