

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-067132

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Denton Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

S-27, T-18S, R-29E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

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 and in accordance with any State requirements.
See also space 17 below.)

At surface

790 FNL & 990 FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3463. GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Spud. 8 5/8" & T.D.

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

11-12-82 Spudded with 12 1/4" bit. Ran 340' of 8 5/8" 24# casing. Set & cemented at 352' with 250 sx Class "C" & 2% CaCl.

11-13-82 WOC 18 hrs. Tested BOP to 800# for 30 min. Held O.K.

11-18-82 T.D. 3100'. Ran 76 jts. 4 1/2", 10.5# 8rd casing. Set & cemented 3100' with 1200 sx 50/50 Poz "C", 6% CF9, 3% TF4, 3% KCL & 2% AFS. Circulated to Surface.

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

SIGNED

Ray Westall

TITLE

Operator

DATE 11-29-82

(This space for Federal ACCEPTED FOR RECORD)

APPROVED BY

(ORIG. SGD.) DAVID R. GLASS

CONDITIONS OF APPROVAL, IF ANY:

DEC 6 1 1982

MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO

See Instructions on Reverse Side

OIL & GAS
MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO

