|   | NW OIL CONS. CO  | MM15S10-                                      |                      | Approved.                                      |
|---|--|---|----------------------|--|
| Form 9-331<br>Dec. 1973   | Drawer DD  | 210   |                      | Approved.<br>t Bureau No. 42-R1424             |
| •   | U SIAILS   | 5. LEASE                                      |                      |  |
| DEPARTMENT  | OF THE INTERIOR  |   | <u>111-06245</u>     |  |
| GEOLOG  | ICAL SURVEY  | 6. IF INDIAN                                  | , ALLOTTEE           | OR TRIBE NAME                                  |
| SUNDRY NOTICES A  | ND REPORTS ON WELLS  | 7. UNIT AGR                                   | EEMENT NA            | ME   |
| (Do not use this form for proposals to reservoir, Use Form 9–331–C for such p | drill or to deepen or play back to a diffe   | 8. FARM OR                                    | LEASE NAM            | E  |
| 1 all gas   | · · ·  |   | gg Feder:            |  |
|   | ther / 🔪 👘 🔅 🖓   | 9. WELL NO.                                   |                      |  |
| 2. NAME OF OPERATOR   | V 19.65  |   | 4                    |  |
| Ray Westal  | 1  | 10, FIELD OR                                  |                      |  |
| 3. ADDRESS OF OPERATOR  | -1   |   | gart - 🖓             |  |
|   | o Hills, New Mexico 88   |   | R., M., OR B         | LK. AND SURVEY OR                              |
| <ol> <li>LOCATION OF WELL (REPOR<br/>below.)</li> </ol>                       | RT LOCATION CLEARLY. See space   |   | 185, 30              | E  |
| AT SURFACE: 12  | 210' FSL & 2600 FWL  | 12. COUNTY                                    |                      |  |
| AT TOP PROD. INTERVAL:  | same   | Edd   | y                    | N.M.   |
| AT TOTAL DEPTH:   | same FEB 26 198  | 14. API NO.                                   | <u> </u>             |  |
|   | TO INDICATE NATURE OF NOTI   |   |                      |  |
| REPORT, OR OTHER DATA   | O, C. D.<br>ARTESIA, OFFIC<br>SUBSEQUENT REPORT OF:  | E 15 ELEVATIO                                 | DNS (SHOW<br>463. GR | DF, KDB, AND WD)                               |
| REQUEST FOR APPROVAL TO:  | SUBSEQUENT REPORT OF:  | <b>b</b>                                      |                      |  |
| TEST WATER SHUT-OFF   |  |   |                      |  |
| FRACTURE TREAT  | <u> </u>   |   |                      |  |
|   | Ä  | (NOTE: Report                                 | t results of mu      | ltiple completion or zone                      |
| PULL OR ALTER CASING  |  |   | e on Form 9–3        |  |
| MULTIPLE COMPLETE   |  |   |                      |  |
| CHANGE ZONES  |  |   |                      |  |
| ABANDON*  | 1  |   |                      |  |
| (other)   |  |   |                      |  |
| including estimated date of   | COMPLETED OPERATIONS (Clearly<br>starting any proposed work. If well<br>lepths for all markers and zones per | is directionally drill                        | ed, give sub:        | give pertinent dates,<br>surface locations and |
| 02-12-87 Perforated:  | 3594-3604 20 holes 3   | 2 holes per fo                                | ot                   |  |
| 02-16-87 Acidized:  | w/1250 gal. 15% HCL, $3$ FE agent, $1\frac{1}{2}$ gal. inh   | 2 <sup>1</sup> 2 gal. NE age<br>ibitor, 1050# | nt, 6 ga<br>KCL, 150 | ll.<br>gal. wtr.                               |

:

| 00 18 87 | Transture. | 20,000, ~1  | FE-30 | using 30,000#     | 20/40. | 10.000# | 12/20. |
|----------|------------|-------------|-------|-------------------|--------|---------|--------|
| 02-18-87 | Fracture:  | 20,000 gal. | WF-30 | using $50,000\pi$ | 20/40, | 10,000# | 12/20. |

| Subsurface Safety Valve: Manu. and Type      |  |      | Set @ Ft.            |
|--|--|------|----------------------|
| 18. I hereby pertify that the foregoing is t |  |      |                      |
| SIGNED_Kay Westall                           | TITLEOperator                              | DATE | 2-20-87              |
|  | (This space for Federal or State office us | se)  |                      |
| APPROVED BY                                  | TITLE                                      | DATE |                      |
| CONDITIONS OF APPROVAL, IF ANY:              |  |      | ACCEPTED FOR RECORD  |
|  | •  |      |                      |
|  | *See Instructions on Reverse Side          |      | FEB 2 4 1987         |
|  |  |      | Fren                 |
|  |  |      | CARLSBAD, NEW MEXICO |