

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

☐ Oil Well ☐ Gas Well ☒ Other SWD ✓

2. Name of Operator

RAY WESTALL

3. Address and Telephone No.

P.O. BOX 4 LOCO HILLS NM 88255 (505) 677-2370

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1210' feet south and 2600' feet west

35-18-30

5. Lease Designation and Serial No.

NM-06245

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

TRIGG FEDERAL #4

9. API Well No.

30-015-25719

10. Field and Pool, or Exploratory Area

SHUGART 7RQNGB

11. County or Parish, State

EDDY COUNTY

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other \_\_\_\_\_
- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☒ Conversion to Injection  
☐ 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.)\*

CONVERTED TO SWD UNDER THE ORDER OF OCD.  
FORMATION AT APPROXIMATELY 3594' FEET TO 3604'  
PACKER LOCATED AT APPROXIMATELY 3550' FEET  
PRESSURE TESTED AUGUST 18, 1995.  
WITNESSED BY THE OCD.

Post ID-3  
11-3-95  
cmw to SWD

**RECEIVED**

OCT 24 1995

OIL CON. DIV.  
DIST. 2

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

Signed

Joan Harper

Title

Production Analyst

Date

10-23-95

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date