

N. M. O. G. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved
Budget Bureau No. 42-R1425.

30-015-21612

5. LEASE DESIGNATION AND SERIAL NO.

LC 065680

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

KEOHANE FEDERAL

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

SHUGART

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

23 - 18 S - 31 E

12. COUNTY OR PARISH

13. STATE

EDDY

N MEX

12. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

13. TYPE OF WELL

OIL
WELL ☒GAS
WELL ☐

OTHER

SINGLE
ZONE ☐MULTIPLE
ZONE ☐

14. NAME OF OPERATOR

WESTALL - MASK

15. ADDRESS OF OPERATOR

DRAWER 1477, ROSWELL NM 88201

16. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

990' FROM SOUTH LINE

At proposed prod. zone

1750' FROM WEST LINE

17. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

18. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drig. unit line, if any)

990

19. NO. OF ACRES IN LEASE

160

20. NO. OF ACRES ASSIGNED
TO THIS WELL

40

21. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

1320

22. PROPOSED DEPTH

4,000'

23. ROTARY OR CABLE TOOLS

ROTARY

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

3668 GR

25. APPROX. DATE WORK WILL START*

26.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
11"	8 5/8	20#	650	APPROX 225 SCKS TO CIRCULATE
7-7/8	5-1/2	14	4000	225 SCKS

RECEIVED

AUG 20 1975

D. C. C.
ARTESIA OFFICERECEIVED
JUL 23 1975
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

27.

SIGNED

Jack Mack

TITLE

CO-OWNER

DATE

7/22/75

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

THIS APPROVAL WITHSCINDED IF OPERATIONS
ARE NOT COMMENCED WITHIN 3 MONTHS.
EXPIRES NOV 19 1975

DATE

*See Instructions On Reverse Side

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

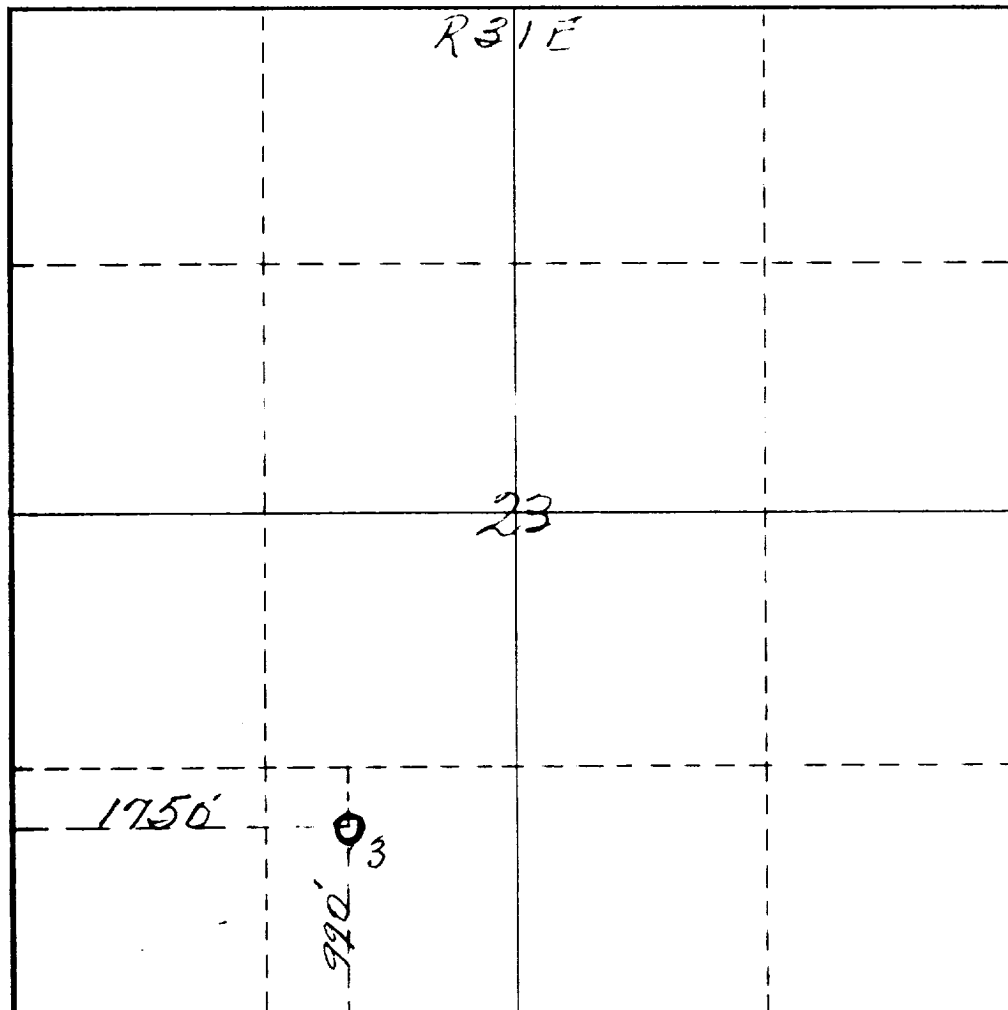
Operator <i>Westall & Mask</i>		Lease <i>Keohane Federal</i>		Well No. <i>3</i>
Unit Letter <i>N</i>	Section <i>23</i>	Township <i>18 South</i>	Range <i>31 East</i>	County <i>Eddy</i>
Actual Footage Location of Well: <i>990</i> feet from the <i>South</i> line and <i>1750</i> feet from the <i>West</i> line				
Ground Level Elev. <i>3668</i>	Producing Formation <i>Q-Gb</i>	Pool <i>Shugart</i>	Dedicated Acreage: <i>40</i> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.

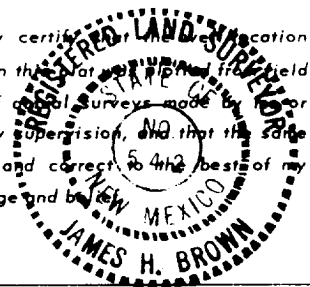


CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

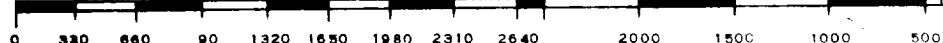
Name: *Westall & Mask*
Position: *Co-owner*
Company: *Shugart - Mask*
Date: *7/22/75*

I hereby certify that the location shown on this plat was taken from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.



Date Surveyed: *July 18th 1975*
Registered Professional Engineer and Land Surveyor

James H. Brown
Certificate No. *542*



PLAN OF DEVELOPMENT

KEOHANE FEDERAL # 3

THE ATTACHED PLATS SHOW INFORMATION REQUESTED IN ITEMS NO. 1, 2, 3, 4, 5, AND 10.

NO. 6. WATER SUPPLY WILL BE OBTAINED FROM I & W INC.

NO. 7. WASTE DISPOSAL WILL BE HANDLED BY CIRCULATING AND TREATING FACILITIES INSTALLED AT THE PROPOSED TANK BETTERY. ALL DRILLING WASTE WILL BE BURIED 24" BELOW THE SURFACE.

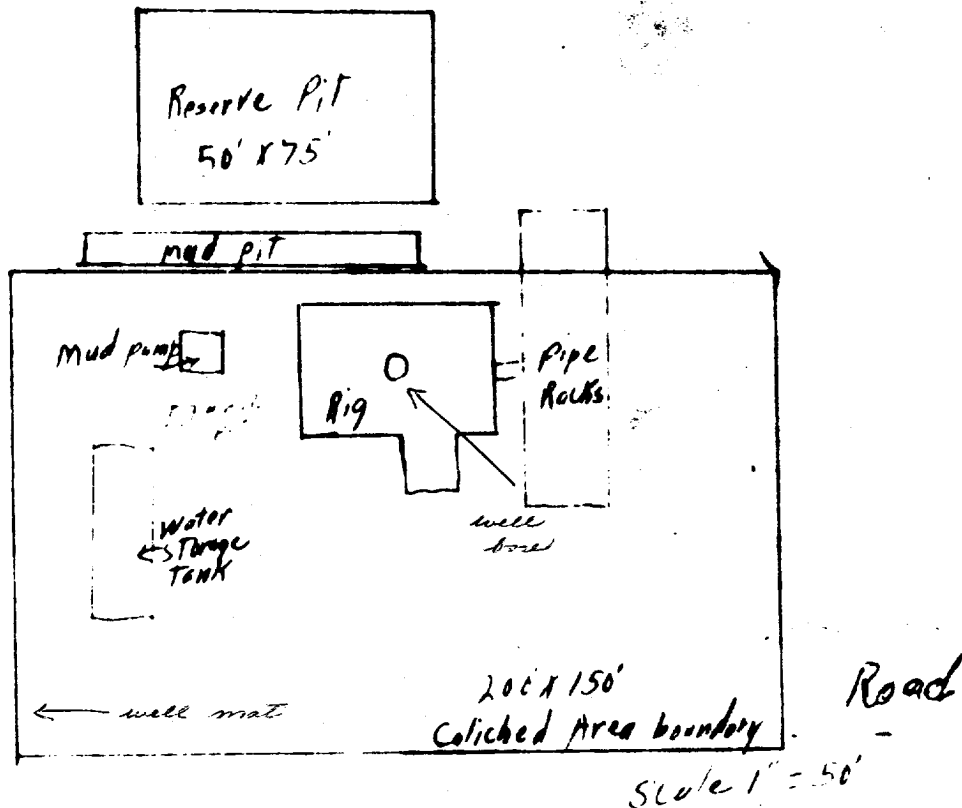
NO. 8. THERE ARE NO CAMPS IN THIS VICINITY

NO. 9. THERE ARE NO AIRSTRIPS IN THIS VICINITY

NO. 11. AFTER COMPLETION OF WELL, ALL PITS ARE TO BE FILLED AND LEVELLED AND RETURNED TO AS NEAR NORMAL CONDITION AS REASONABLY POSSIBLE.

NO. 12. MUD PROGRAMS - WE WILL USE FRESH WATER TO 650' AND THEN USE SALT GEL TO TOTAL DEPTH

BLOWOUT PREVENTER WILL BE DOUBLE MANUAL (SHAEFFER) B. O. P. WITH 3000# TEST.



Development Plan for Surface Use

WESTALL MASK DRAWER 1477, ROSWELL NM 88201

KEOHANE FEDERAL # 3

LOCATED 990' FROM SOUTH LINE AND 1750' FROM WEST LINE
SEC 23 T 18 S R 31 E N.M.P.M. EDDY COUNTY NM

[illegible]

1. *Journal of the American Medical Association*, 1997; 277: 1033-1036.

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