

**NMOCC COPY ED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**GEOLOGICAL SURVEY**

SUBMIT IN TRIPI  
(Other instructions  
verse side)

*Copy to SF*  
Form approved.  
Budget Bureau No. 42-R1424.

**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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. <b>LC 029392 (B)</b>
2. NAME OF OPERATOR <b>Westall - Mask</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <b>P.O. Drawer 1477 Roswell, N.M. 88201</b>		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>330' FNL and 1,650' FWL</b>		8. FARM OR LEASE NAME <b>Hinkle "B" Federal</b>
14. PERMIT NO.		9. WELL NO. <b>#6</b>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>3,626 GR.</b>		10. FIELD AND POOL, OR WILDCAT <b>Shugart</b>
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>34 - 18S - 31E</b>
		12. COUNTY OR PARISH <b>Eddy</b>
		13. STATE <b>N.Mex.</b>

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

NOTICE INTENTION TO :

SUBSEQUENT REPORT OF :

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other) **Plugback + permeate** ☒  
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

(Other)

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.)

*temp*  
We set a plug at 2,775' ~~Total Depth~~ on 12/30/77.

We perforated .40 Holes at intervals of 2,554' - 2,750' on 12/30/77.

*Plug removed after treatment*

**RECEIVED**  
**JAN 20 1978**  
**U. S. GEOLOGICAL SURVEY**  
**ARTESIA, NEW MEXICO**

I hereby certify that the foregoing is true and correct

SIGNED

TITLE

**Co-Owner**

DATE

**01/19/78**

(This space for Federal or State office use)

APPROVED BY

TITLE

**ACTING DISTRICT ENGINEER**

DATE

**JAN 24 1978**

CONDITIONS OF APPROVAL, IF ANY:

**APPENDIX**

[illegible]

1. *Chlorophyll *a** and *Chlorophyll *b** were determined by the method of Arar and Collins (1971).

