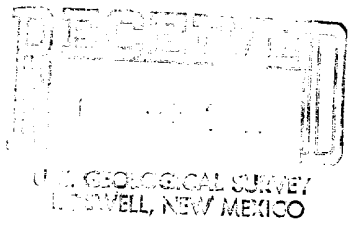
N.M.O.C.D. COPY



TO AMMEND ORIGINAL SURFACE USE PLAN

Westall - Mask Well #~~14-B~~ Hinkle Federal #14 ✓
330' FEL and 1650' FSL, Sec. 35: T18-R31E
Lease #LC029392 (B) Eddy County, New Mexico

This is to ammend Surface Use Plan submitted 12-20-80 and to accompany for 9-331 "Sundry Notices and Reports on Wells" to include the Right of Way of secondary power line.

I: Attachments:

a. Copy of staking sheet

b. Copy of Schedule 1-A previously submitted, ammended to include the right of way for secondary power line.

c. Copy of original surface use plan.

d. Form 9-331

I hereby certify that this is true and correct to the best of my knowledge

Signed	Title	Date
	Personal Representative for the Estate of Jack Mask	1-31-81

STAKING SHEET

School District No.	11-Eddy
Right of Way No.	Federal
Sec. Voltage	240/480

System Designation: New Mexico 4 Eddy

Consumer [illegible]
Sec. 24-25-35 Twp. 19 R. 31
Map Reference

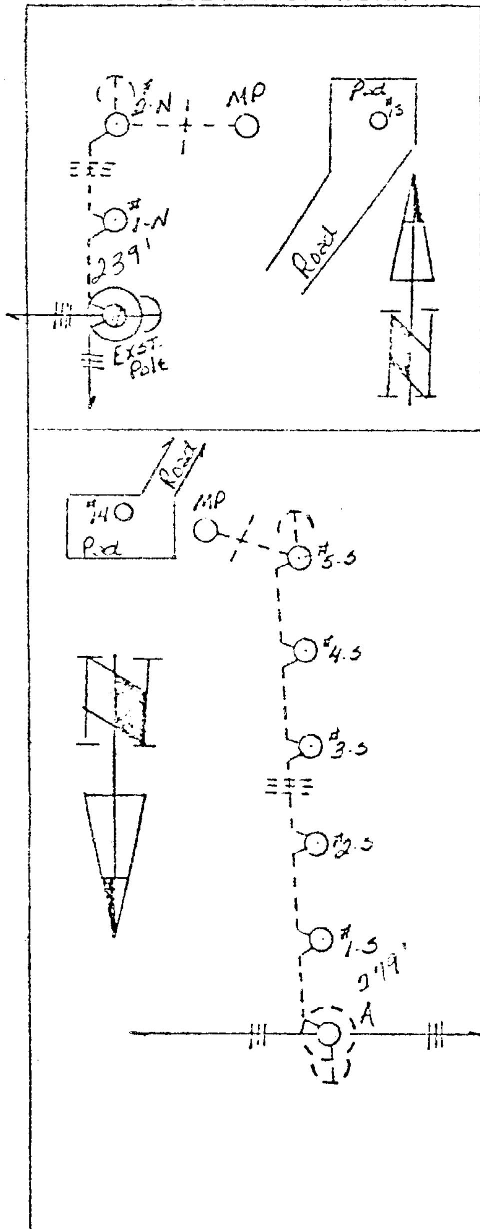
Sheet No. 1 of 1

Line ______ Lead ______

ENGINEER
Staked RG 1-21-81
Checked
Released for Const.

Pri. Wire Size Kind Ruling Span

SKETCH OF WORK



POLE NO.	PRI. (BACK) SPAN	POLES H&C	PRI. UNIT #	PRI. UNIT	LINE ANGLE	TRANS. "G"	GR. "M2"	GUY NO.	GUY UNIT "E"	ANCHOR "F"	SECONDARY SPAN UNDER-BUILD	SECONDARY SPAN SEC. ONLY	SECONDARY UNIT NO.	SECONDARY UNIT J OR K	SERVICE SPAN	SERVICE UNIT NO.	SERVICE UNIT K	SEC. OR SER. WIRE SIZE	MISC. UNITS	REMARKS CLASSIFICATION: [illegible]
																				Hwy 6 Fed #12 [illegible]
MP		35-6					-1								75'	1	K14	#4/0 3/wc	1 MC	Acct # 21-
#2-N		35-6					-1		E1-5T	F1-3		239'	3	J6		1	K14	#4/0 Acsr		[illegible] 21-17-81
#1-N		35-6					-2					239'	3	J5				#4/0 Acsr		[illegible]
Exst Pole													3	J5						
																				Hwy 6 Fed #[illegible]
MP		35-6					-1								70'	1	K14	#4/0 3/wc	1 MC	Acct # 21- [illegible]
#5.5		35-6					-1		E1-5T	F1-3		279'	3	J6		1	K14	#2/0 Acsr		[illegible] 35-17-81
#4.5		35-6					-2					279'	3	J5				#2/0 Acsr		[illegible]
#3.5		35-6					-2					279'	3	J5				#2/0 Acsr		
#2.5		35-6					-2					279'	3	J5				#2/0 Acsr		
#1.5		35-6					-2					279'	3	J5				#2/0 Acsr		
A		40-5		29 [illegible]		G-214-5	-1		E1-2T	F1-3			3	J6						

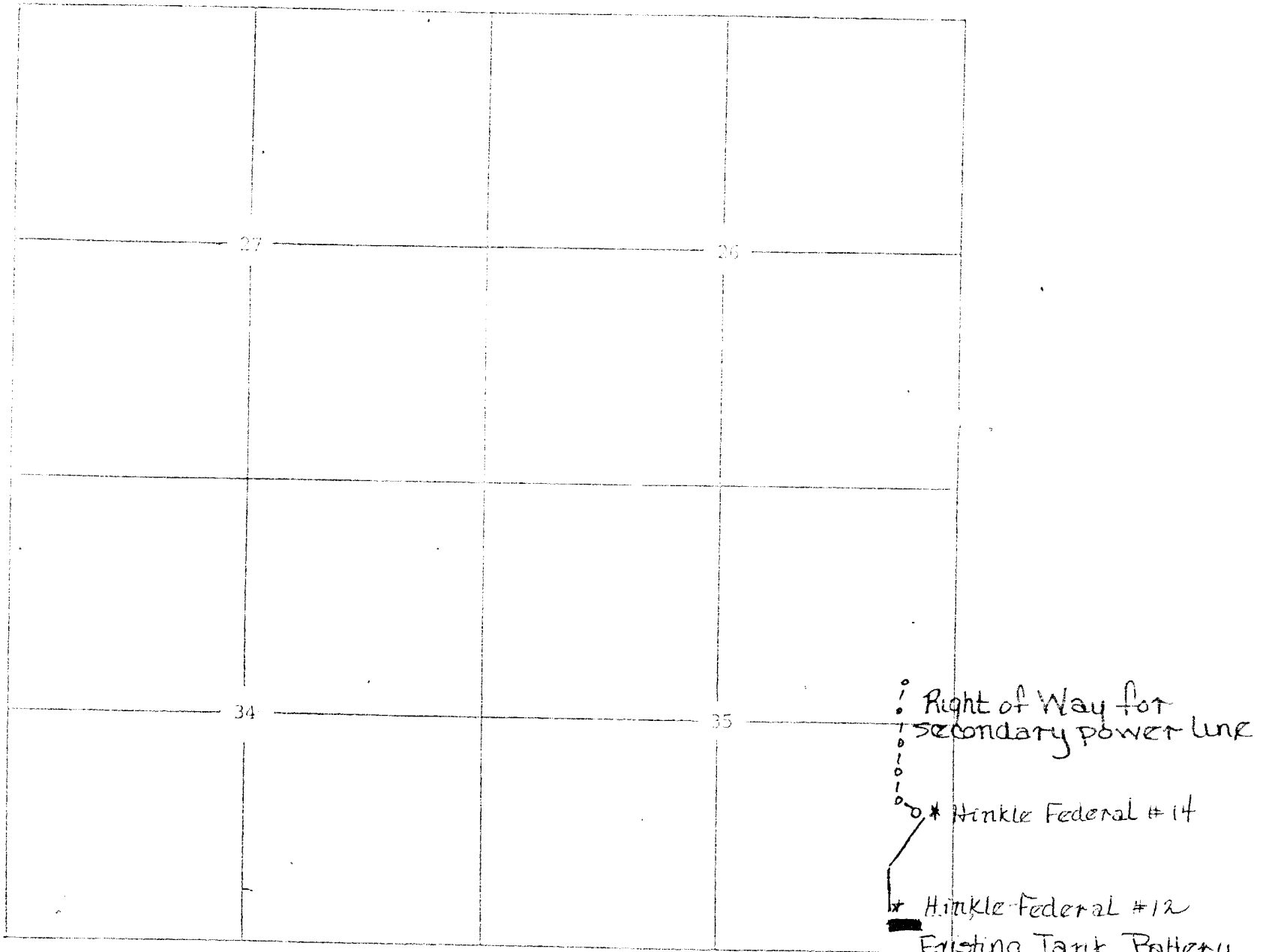
SUMMARY

NO.	UNIT	NO.	UNIT	NO.	UNIT	NO.	UNIT
7	35-6	5	M2-2	17	J5	475'	#2/0 Acsr
2	35-6	5	M2-1	4	K14		
1	40-5	3	E1-2T	2	[illegible]		
1	29 [illegible]	3	F1-3	145'	[illegible]		
1	G-214-5	9	J1	[illegible]	[illegible]		

	FEET	NO.	POLE LINE FEET	TYPE OF CONDUCTOR
PRIMARY LINE				
SECONDARY	[illegible]	3	[illegible]	#2/0 Acsr
Secondary	[illegible]	3	[illegible]	#4/0 Acsr
SERVICE DROP	[illegible]	1	[illegible]	[illegible]
TOTAL				
NO. OF MEMBERS				

Section 35 Township 18 Range 31

SCHEDULE 1-A



Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.: LC3-029392 (B)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

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 [X] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME:

2. NAME OF OPERATOR: Westall - Mask

8. FARM OR LEASE NAME: "B" Hinkle Federal

3. ADDRESS OF OPERATOR: P.O. Box 1477 Roswell, New Mexico 88201

9. WELL NO.: 14

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 330'FEL and 1650'FSL

10. FIELD AND POOL, OR WILDCAT: Shugart Y-SR-Q-G

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec35 T-18S-R31-E

14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE
	3640.6	Eddy	N.M.

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

NOTICE OF 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) secondary power line			
(Other)				(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.)*

This is to ammend surface use plan submitted 12-20-80 to include Right of Way for secondary power line

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

SIGNED [signature] TITLE Personal Representative for the Estate of Jack Mask DATE 1-31-81

(This space for Federal or State office use)

APPROVED
(Orig. Sgd.) PETER W. CHESTER
MAR 11 1981
JAMES A. GILLHAM
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side