

C/SF

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

REPROD. COPY
SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC #029392 (B)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

HINKLE FEDERAL

9. WELL NO.

#14

10. FIELD AND POOL, OR WILDCAT

SHUGART Y-S

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

SEC:35T18S-R31-E

12. COUNTY OR PARISH 13. STATE

1. OIL ☒ GAS ☐ OTHER ☐
WELL WELL

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

WESTALL - MASK ✓

P.O. Box 1477 ROSWELL, NEW MEXICO 88201

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

14. PERMIT NO.

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

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) RUN CASING

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

ON 1-23-81 THE FOLLOWING WORK WAS PERFORMED ON THE ABOVE WELL

RUN 4½ CASING RAN 105 JTS 4223-A½ 9-5 B RD CASING SET AND
CEMENTED AT 4200 W450 SX C50-50PAS 2% GEL 3# 3/10 OF 1% CF R2
PLUG DOWN
SET SLIPS AND JET PIT
RIG RELEASED

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

SIGNED

RICHARD E. BARTON

(This space for Federal or State office use)

PETER W. CHESTER

APPROVED BY

CONDITIONS OF APPROVAL

PERSONAL REPRESENTATIVE

FOR THE ESTATE OF

JACK MASK

DATE 2-10-81

TITLE

DATE

U.S. GEOLOGICAL SURVEY
ROSWELL, N.M.

*See Instructions on Reverse Side