

UNITED STATES OF AMERICA
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.

LC-029392 B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hinkle "B" Federal

9. WELL NO.

#19

10. FIELD AND POOL, OR WILDCAT

Shugart-Y-SR-G-G

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

Sec. 34 - T18S-R31E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Westall - Mask P.O. Drawer 1477 Roswell, N.M. 88201

3. ADDRESS OF OPERATOR

P.O. Drawer 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' FWL and 990' FNL

14. PERMIT NO.

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

3618.9 GR

RECEIVED BY
JAN 14 1986
O. C. D.
ARTESIA, OFFICE

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

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(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.)*

Set Temporary plug at 2850'

Perforated 1 hole every 2 feet for a total of 44 holes at 2662-2802

Frac 80,000 gallon gelled 2% KCl H2O

120,000 # 20/40 sand

Treating Pressure 2400

ACCEPTED FOR RECORD

JAN 13 1986

CARISBAD, N.M. MEXICO

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

SIGNED *Richard E. Burt*

TITLE Trustee of the Jack Masko Trust 1-8-86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: