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Form 9-331  
**RECEIVED BY**  
**DEC 19 1984**  
**O. C. D.**  
**ARTESIAN**

NM OIL CONS. COMMISSION  
UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Form Approved.  
Budget Bureau No. 42-R1424

**ARTESIAN 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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐  
2. NAME OF OPERATOR Ray Westall  
3. ADDRESS OF OPERATOR P.O. Box 4 Loco Hills, NM 88255  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 990 FHL 660 FEL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) <u>Spud, 8 5/8", T.D., 53" csg.</u>		

5. LEASE NM 28500  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME Hill Federal  
9. WELL NO. 2  
10. FIELD OR WILDCAT NAME Und. N. Hackberry-Yates Sk.  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA S21-19S-31E  
Hackberry  
12. COUNTY OR PARISH Eddy 13. STATE NM  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD) 3503. GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

11-13-84 Spud 12 1/4" hole @ 6:45 P.M.  
Ran 355' 8 5/8" 24# casing. Cemented w/200 sxs Class "C" 2% CaCl.  
WOC 18 hrs. Pressure test casing to 500#. Held 30 min. no drop.  
11-16-84 T.D. 2450'. Ran 59 jts. 5 1/2" 17# casing. Cemented w/300 sxs Class "C".  
Circulated 100 sxs to pit. WOC

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Ray Westall TITLE Operator DATE 12-5-84  
(This space for Federal or State office use)

APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL IF ANY DEC 19 1984

Carlsbad, NM 88502 \*See Instructions on Reverse Side