## N.M. C Cons. Division 811 S. 1st Street Artesia, NM 38210-2834

CIST

Form 3160-5

## HMITED STATES

June 1990)	DEPARTME	ENT OF THE INTERIOR	FORM APPROVED  Budget Bureau No. 1004-0135  Expires: March 31, 1993
	BUREAU OF	LAND MANAGEMENT	5. Lease Designation and Serial No.
	SUNDRY NOTICE	S AND REPORTS ON WELLS	₩ 029392b
Do not	use this form for proposals to	drill or to deepen or reentry to a different rese OR PERMIT—" for such proposals	6 16 1 1 1 1 1 1 1
		IT IN TRIPLICATE	7. If Unit or CA, Agreement Designation
I. Type of Oil We		2 Ju A	8. Well Name and No.
	Operator Other		
Ray Westall		SCALLS OF THE STATE OF THE STAT	HINKLE FEDERAL B #20
3. Address and Telephone No.		6	30-015-25815
P. C	). Box 4, Loco Hills	NM 88255, (5050) 677-2370	10. Field and Pool, or Exploratory Area
4. Location	of Well (Footage, Sec., T., R., M., or Survey	Description)	SHUGART Y-7RVRS-QN-GB
	310' FSL & 2310' FEL 18S 31E		11. County or Parish, State
<u>~ .</u>	102 315		EDDY, NM
12.	CHECK APPROPRIATE BOX	X(s) TO INDICATE NATURE OF NOTICE, R	EPORT, OR OTHER DATA
TYPE OF SUBMISSION		TYPE OF ACTION	
	Notice of Intent	Abandonment	Change of Plans
	<u> </u>	Recompletion	New Construction
	Subsequent Report	Plugging Back	Non-Routine Fracturing
	Final Abandonment Notice	Casing Repair	₩ Water Shut-Off
	Trial Adandonment Notice	Altering Casing Other	Conversion to Injection Dispose Water
			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
gıv	e subsurface locations and measured and true ve	e all pertinent details, and give pertinent dates, including estimated date of the critical depths for all markets and zones pertinent to this work.)*	of starting any proposed work. If well is directionally drilled,
1.	Formation producing		
2.		rels of water per day is prod	
3.	All fluids are moved battery located on t	N via a 2½" steel flowline to the Hinkle B #l location SWSE	the central tank Section 27.
4.	Water is separated f pit on location. (NM	rom oil and is released into OCD, R3221)	the authorized
			APPROVED PETER W. CHESTER
		•	JUL 2 2 1999
			BUREAU OF LAND MANAGEMENT
14. 1 hereb	y certify that the foregoing is true and correct		BOURCE AREA
Signed		Title Geologist	Date 7-8-99
(This s	page for Federal or State office use)		
Approv Conditi	red byions of approval, if any:	Title	Date
Condin			