

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPI  
(Other instructions  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM59381

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

MERIDIAN FEDERAL

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

PARKWAY

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

SEC 3, T-20S, R-29E

12. COUNTY OR PARISH 13. STATE

EDDY

NM

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

RAY WESTALL

3. ADDRESS OF OPERATOR

PO BOX 4 LOCO HILLS, NM 88255

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)

At surface

660 FNL & 660 FWL

14. PERMIT NO.

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

3661-GL

10. 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)

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 perti-  
nent to this work.) \*

05-25-90 Log Bell Cmt Bnd Log, Perf. 2 SPF 8157'-8177', Acid  
W/3000 gal 15% SRA

05-29-90 Set CIBP @ 8145', Perf 2nd Bone Springs, 10 shots 8038-8070'

05-30-90 Acid w/2500 gal 7 1/2% SRA, Swab w/2% Oil & Gas.

05-31-90 Perf 2nd Bone Springs 7930'-8002'. 15 shots.

06-01-90 Acid 7930'-8002' w/ 1500 gal 7 1/2% SRA

06-02-90 Frac 7930'-8070' w/ 100,000 gal x-link gel water, 201,000# 16/30  
Ottawa sand + 24,000# West prop 4. AIR 30 BPM @ 1700# ISDP 1570#  
15 min 1440#

06-03-90 Flow. well back

RECEIVED

JUL 13 '90

A. D.

OFFICE

ACCEPTED FOR RECORD

Adm

JUN 11 1990

U. S. BUREAU OF LAND MANAGEMENT

CARLETON COUNTY  
AREA HEADQUARTERS

JUN 7 10 40 AM '90

RECEIVED

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

SIGNED

*Alinda J. Jaeger*

TITLE Production Clerk

DATE 06-06-90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side