FORM 3160-5

(JUNE 1990)

JNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT ALL OIL CONS. Division reh 31, 1993

Budget Bureau No. 1004-0135

		NM-0554771 NM 8821 In 2634 tree or Tribe Name 7. If Unit or CA, Agreement Designation
	SUBMIT IN TRIPLICATE	
Type of Well X Oil Well Gas Well Ot	her	8. Well Name and No.
Name of Operator	// 4	TOG FEDERAL #6
J. C. WILLIAMSON		9. API Well No.
Address and Telephone No.	Reco	30-015-27004
P. O. BOX 16, MIDLAND, TX 7		10. Field and Pool, or Exploratory Area
Location of Well (Footage, Sec., T., R	λ , M., or Survey Description) $Ah \mathcal{T}_{\widetilde{\mathcal{L}} S/\widetilde{\mathcal{A}}}$	BURTON DELAWARE, EAST
UNIT O, SEC 16, T20S, R29E		11. County or Parish, State
990' FSL & 2160 FEL	M. C. al G. A.	EDDY CO., NEW MEXICO
CHECK APPROPRIATE BO	X(s) TO INDICATE NATURE OF NOTICE, REP	ORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
X Subsequent Report	Plugging Back	Non-Routine Fracturing
í		
Final Abandoment Notice	Casing Repair	Water Shut-Off
Final Abandoment Notice	Casing Repair Altering Casing	Water Shut-Off Conversion to Injection
Final Abandoment Notice		Conversion to Injection Dispose Water
Describe Proposed or Completed Operations	Attering Casing	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form). mated date of starting any proposed work.
Describe Proposed or Completed Operations If well is directionally drilled, give subsurface	Altering Casing X Other EXTENTION OF TIME 5 (Clearly state all pertinent details and give pertinent dates, including esti	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form). mated date of starting any proposed work. ones pertinent to this work.)*
Describe Proposed or Completed Operations If well is directionally drilled, give subsurface	Altering Casing X Other EXTENTION OF TIME 5 (Clearly state all pertinent details and give pertinent dates, including est e locations and measured and true vertical depths for all markers and zero. TA status in order to work on well to place it baths.	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form). mated date of starting any proposed work. ones pertinent to this work.)*

fraudulent statement or representations as to any matter within jurisdiction.