

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

AUG 28 2014

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

RECEIVED

SUBMIT IN TRIPLICATE - Other Instructions on page 2.

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other INJECTION WELL		5. Lease Serial No. NMLC047800A
2. Name of Operator RAY WESTALL OPERATING, INC.		6. If Indian, Allottee, or Tribe Name
3a. Address P.O. BOX 4, LOCO HILLS, NM 88255		7. If Unit or CA. Agreement Name and/or No.
3b. Phone No. (include area code) 575-677-2370		8. Well Name and No. TAYLOR UNIT #9
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) UL- E, SEC-12, TWP-18S, RNG-31E, 660' FSL & 660' FEL		9. API Well No. 30-015-05528
Lat. Long.		10. Field and Pool, or Exploratory Area SHUGART
		11. County or Parish, State EDDY NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize
<input checked="" type="checkbox"/> Subsequent Report	<input checked="" type="checkbox"/> Altering Casing
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Deepen
	<input type="checkbox"/> Fracture Treat
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Plug and abandon
	<input type="checkbox"/> Plug back
	<input type="checkbox"/> Production (Start/ Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Water Shut-off
	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Other

13. Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

- 1). SET CIBP @ 3370'.
- 2). RAN 4 1/2", J-55, 11.6# CSG TO 3368'.
- 3). CEMENTED W/325 SX CLASS "C" CEMENT W/ADDITIVES 14.8 DENSITY - 1.33 YIELD.
- 4). WOC - 72 HOURS.
- 5). DRILL OUT CIBP.
- 6). GIH W/NICKEL PLATED AD-1 PKR AND SALTA LINED 2 3/8" TBG. PUMP PACKER FLUID. SET PKR @ 3312'. CALLED BLM, MR. PAUL SWARTZ, TO PERFORM MIT.
- 7). 5-22-2014 RAN MIT TO 560 PSI (BEGINNING) - 560 PSI ENDING. WITNESSED BY PAUL SWARTZ.
- 8). RETURN TO INJECTION.

APD 9-3-2014
Accepted for record
NMOCB

NM OIL CONSERVATION
ARTESIA DISTRICT

14. I hereby certify that the foregoing is true and correct.
Name (Printed/ Typed)

SKYLER VALENCIA

Signature:

Title: **BOOKKEEPER**

Date: **6/23/14**

RECEIVED

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

ACCEPTED FOR RECORD

Approved by:

Title:

Date:

Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office:

AUG 27 2014

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

PAR FIVE

DESIGN – EXECUTE – EVALUATE – REPORT

4 ½ LINER

**RAY WESTALL OPERATING, INC
TAYLOR FED #9
EDDY COUNTY, NM**

Prepared By: JOHN INGRAM/CUTTER CAVIN

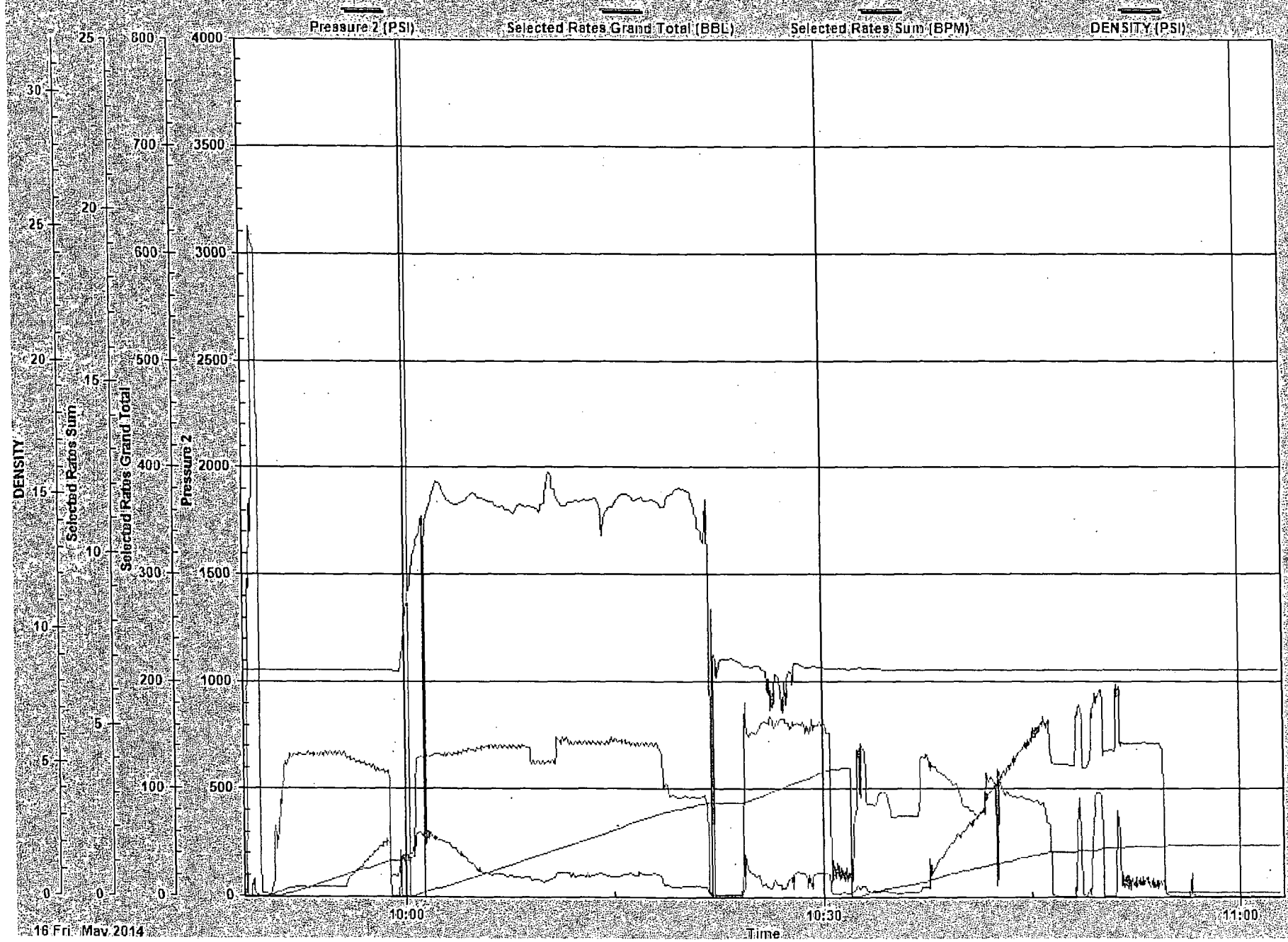
FIELD SPECIALIST

ARTESIA DISTRICT

1-575-748-8610

5-16-14

Plot



PAR FIVE
ENERGY SERVICES LLC

**Cementing Service
Report**

Treatment Number 00003611	Date 5-16-14
STAGE	API. NO

WELL NAME AND NO. TAYLOR FED # 9	LOCATION(LEAGAL)	RIG NAME: PULLING UNIT
FIELD/	FORMATION	WELL DATA: BOTTOM TOP
COUNTY/PARISH EDDY	STATE NM	BIT SIZE CSG/Liner Size 4 1/2
	AFE. NO	TD-3365 WEIGHT 11.6
		ROT CABLE FOOTAGE 3337
		GRADE J55
		MUD TYPE THREAD
NAME RAY WESTALL OPERATING INC		MUD DENSITY LESS FOOTAGE SHOE JOINT(S)
		MUD VISC Disp. Capacity 51.6
AND		TOTAL 51.6

ADDRESS	ZIP CODE	NOTE: Include Footage From Ground Level To Head In Disp. Capacity
SPECIAL INSTRUCTIONS		SHOE FLOAT TYPE Insert
		DEPTH 3
		SHOE TYPE Guide
		DEPTH 3337

IS CASING/TUBING SECURED? YES X NO	CASING WEIGHT + SURFACE AREA (3.14 X R ²)	TUBING VOLUME 31.88 Bbls
LIFT PRESSURE 1120 PSI		CASING VOL. BELOW TOOL 1.9 Bbls
PRESSURE LIMIT 2500 PSI		TOTAL 33.58 Bbls
BUMP PLUG TO +/- 500 PSI		ANNUAL VOLUME 216 Bbls
	No. of Centralizers	

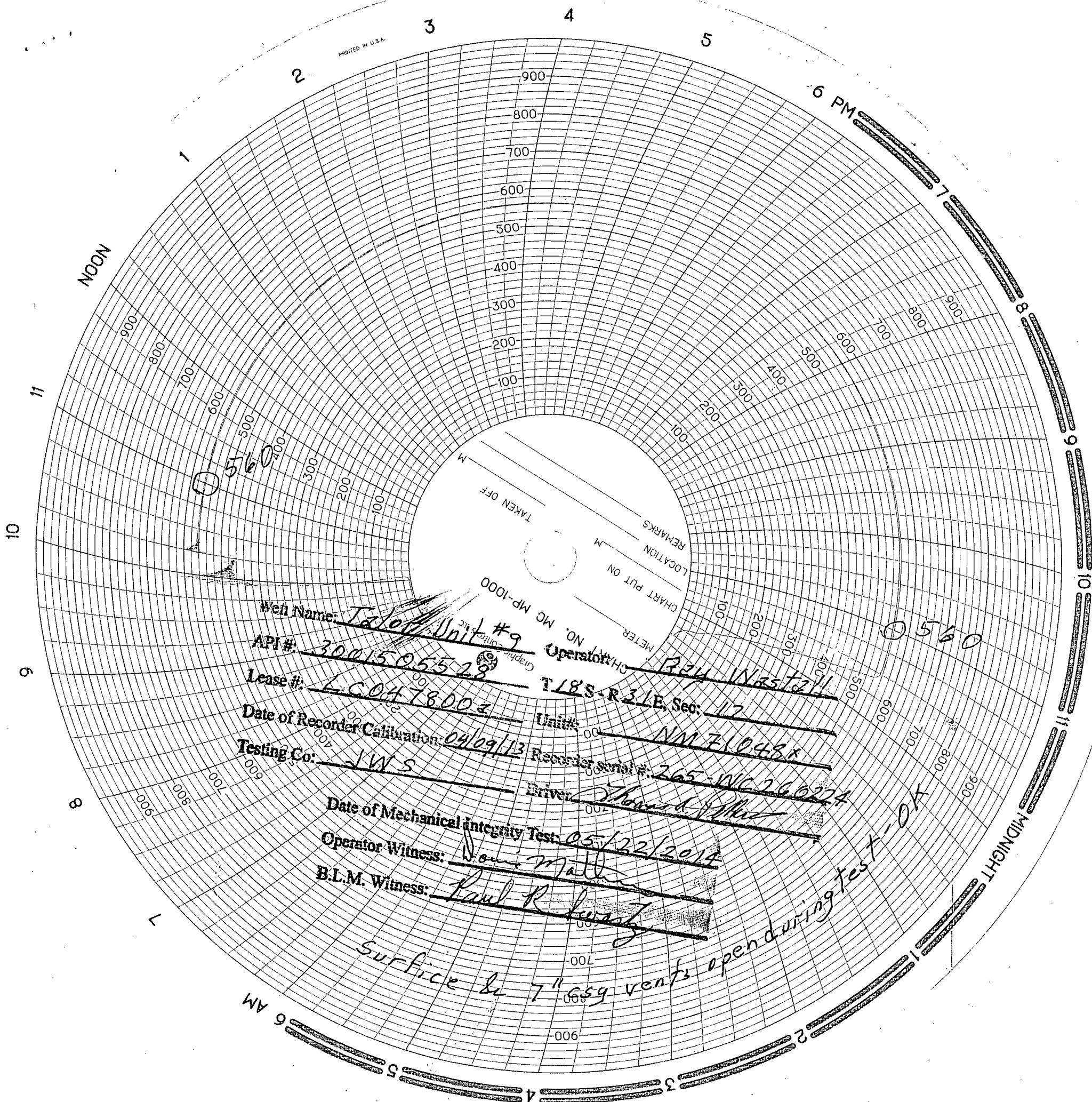
TIME 0001 TO 2400	PRESSURE		VOLUME PUMPED		JOB SCHEDULED FOR TIME 8:00 AM DATE: 5-16-14			ARRIVED ON LOCATION TIME: 8:00AM DATE: 5-16-14		LEFT LOCATION TIME: 11:00 AM DATE: 5-16-14	
	TBG OR D.P.	CASING	INCREMENT	CUM	INJECT RATE	FLUID TYPE	FLUID DENSITY	SERVICE LOG/DETAILS			
8:00								ON LOC RIG UP ON GROUND			
9:35	XXX			XXX				SAFETY MEETING, START JOB			
9:47	XXX	2500	1	XXX	0.5	H2O	8.34	TEST LINES			
9:49	XXX	180	30	XXX	4	H2O	8.34	LOAD PIPE/ SPACER			
9:58	XXX	110	76	XXX	4.5	CMT	14.8	325 SACKS @ 14.8#			
10:19	XXX	0	0	XXX	0	H2O	8.34	SHUT DOWN/ WASH UP			
10:31	XXX	460	51.6	XXX	4	H2O	8.34	DISPLACE			
10:40	XXX	580	10	XXX	3	H2O	8.34	SLOW RATE			
10:45	XXX	950		XXX	0	H2O	8.34	SHUT DOWN			
10:50	XXX	0	0		0	H2O	8.34	CHECK FLOATS .5 BBL BACK			
	XXX										
	XXX										
	XXX										
	XXX										
	XXX							THANK YOU FOR USING PAR FIVE SERVICES!!!!!!			

REMARKS: WE DID NOT BUMP THE PLUG. WE SHUT THE HEAD IN WITH NO PRESSURE ON IT PER COMPANY MAN. ... WE DID NOT CIRCULATE CEMENT TO SURFACE.

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT/SK	COMPOSITION OF CEMENTING SYSTEMS				SLURRY MIXED	
							BBLS	DENSITY
1	325	1.33	C+1%PF13				76	14.8
2								
3								
4								
5								
6								

BREAKDOWN FLUID TYPE	VOLUME	DENSITY	PRESSURE	500	MAX.	0	MIN.
HESITATION SQ.	RUNNING SQ.	CIRCULATION LOST	YES	NO X	Cement Circulated To Surf.	Yes	No X
BREAKDOWN	PSI	FINAL	PSI		TYPE OF WELL	OIL	STORAGE
Washed Thru Perfs	Yes	No	TO	FT.	MEASURED DISPLACEMENT	WIRELINE	BRINE WATER
PERFORATIONS					CUSTOMER REPRESENTATIVE		WILDCAT
TO	TO				MR. DONNIE MATHEWS	MR. CUTTER CAVIN/JOHN INGRAM	
TO	TO						

PRINTED IN U.S.A.



Well Name: Talor

Unit # 9

API #: 3001505528

Lease #: LC0478003

Date of Recorder Calibration: 04/09/13

Testing Co: JWS

Date of Mechanical Integrity Test: 05/22/2014

Operator Witness: Don Math

B.L.M. Witness: Paul R. Lewis

Surface & 7" csg vents open during test - OK