

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD

AUG 14 2014

FORM APPROVED
OMB NO. 1004-0135
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

5. Lease Serial No. NMLC063586
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No. NMNM94514X
8. Well Name and No. LUSK WEST DELAWARE 111 111
9. API Well No. 30-025-30791
10. Field and Pool, or Exploratory LUSK WEST DELAWARE
11. County or Parish, and State LEA COUNTY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: UNKNOWN OTH	
2. Name of Operator SHACKELFORD OIL CO Contact: CLAY HOUSTON E-Mail: CHOUSTON92083@YAHOO.COM	
3a. Address 203 W WALL ST SUITE 200 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-682-9784
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 21 T19S R32E 2310FSL 1650FWL	

12. CHECK APPROPRIATE BOX(ES) 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 type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with 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 recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

WELL T&A, CONVERT BACK TO INJECTOR
GIH W/ 4-3/4" BIT AND DRILL COLLARS TAGGED CEMENT AT 6330' DRILL CEMENT AND CIBP AT 6372'. CLEAN OUT TO 6500'. POOH W/ BIT AND DRILL COLLARS. GIH W/ 5-1/2" COATED PACKER AND 201 JTS 2-7/8" TUBING SET AT 6379', CALLED BLM TO WITNESS TEST. TESTED TO 500 PSI SEE ATTACHED CHART WITNESSED BY JACK JOHNSON OF BLM.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #240727 verified by the BLM Well Information System For SHACKELFORD OIL CO, sent to the Hobbs	
Name (Printed/Typed) DON SHACKELFORD	Title PRESIDENT
Signature (Electronic Submission)	Date 04/01/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

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 _____

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 to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

AUG 15 2014

NOON

6 PM

7

8

9

10

11

MIDNIGHT

6 AM

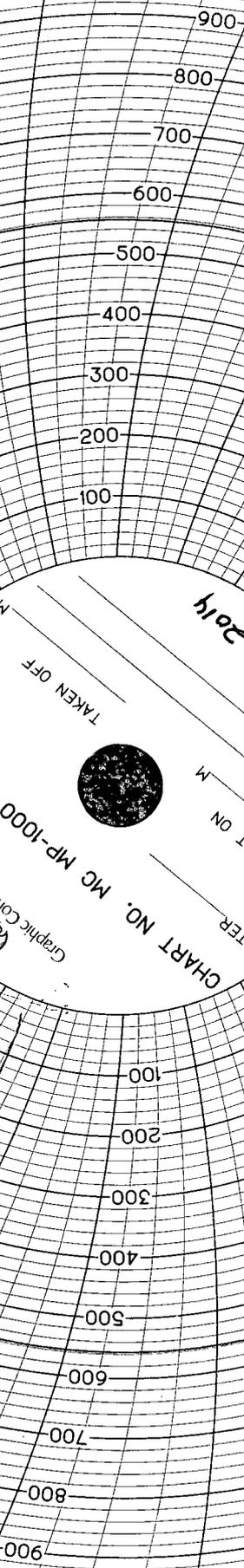
5

4

3

2

1



Shackelford Oil Co
 Husk West Delaware Unit #111 W1W
 Ser. 21 - T 195 R 326
 API 30.025 3079100.00
 56.1560#
 Final 560#
 Time 43min
 Bill Saravak
 OCS

Chocaw
 1000#
 3.25-14
 7

From 520