

Form 3160-3  
(July 1989)  
(formerly 9-331C)

N.M. OIL CONS. COMMISSION  
P.O. BOX 1980  
HOBBS, NEW MEXICO 88240

CONTACT RE...  
OFFICE...  
OF COPIES REQUIRED  
(Other instructions on  
reverse side)

BLM Roswell District  
Modified Form No.  
NM060-3160-2

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL  
WELL ☒

GAR  
WELL ☐

OTHER

SINGLE  
ZONE ☒

MULTIPLE  
ZONE ☐

2. NAME OF OPERATOR

Ray Westall

3a. Area Code & Phone No.

(505) 677-2370

3. ADDRESS OF OPERATOR

Box 4 Loco Hills NM 88255

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)\*

At surface

1980 FSL & 660 FWL

At proposed prod. zone

Same

Unit L

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE\*

20 miles Southeast of Loco Hills

15. DISTANCE FROM PROPOSED\*

LOCATION TO NEAREST  
PROPERTY OR LEASE LINE, FT.  
(Also to nearest drlg. unit line, if any)

660

16. NO. OF ACRES IN LEASE

320

17. NO. OF ACRES ASSIGNED  
TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION\*

TO NEAREST WELL, DRILLING, COMPLETED,  
OR APPLIED FOR, ON THIS LEASE, FT.

1320

19. PROPOSED DEPTH

7700

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3646 Gr.

Gas Line Controlled Water Basin

22. APPROX. DATE WORK WILL START\*

ASAP

23. PROPOSED CASING AND CEMENTING PROGRAM

HOLE SIZE	CASING SIZE	WEIGHT/FOOT	GRADE	THREAD TYPE	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4	8 5/8	26 24	J-55	8 rd	450	350 circulated
7 7/8	5 1/2	15.5	J-55	8 rd	7700	1400 circulated

We propose to drill the surface hole with fresh water  
production hole with brine.

A 10" 900s BOP will be installed on the 8 5/8" casing and tested  
to 6,000# prior to drill out.

3,000#

RECEIVED

SEP 13 9 13 AM '93

RECEIVED

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

TITLE Geologist

DATE 9/10/93

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

Ron Dunton

APPROVED BY

TITLE AREA MANAGER

DATE

CONDITIONS OF APPROVAL, IF ANY:

Approval Subject to  
General Requirements and  
Special Regulations

\*See Instructions On Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false statement.

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

# WATER CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

## WELL LOCATION AND ACREAGE DEDICATION PLAT

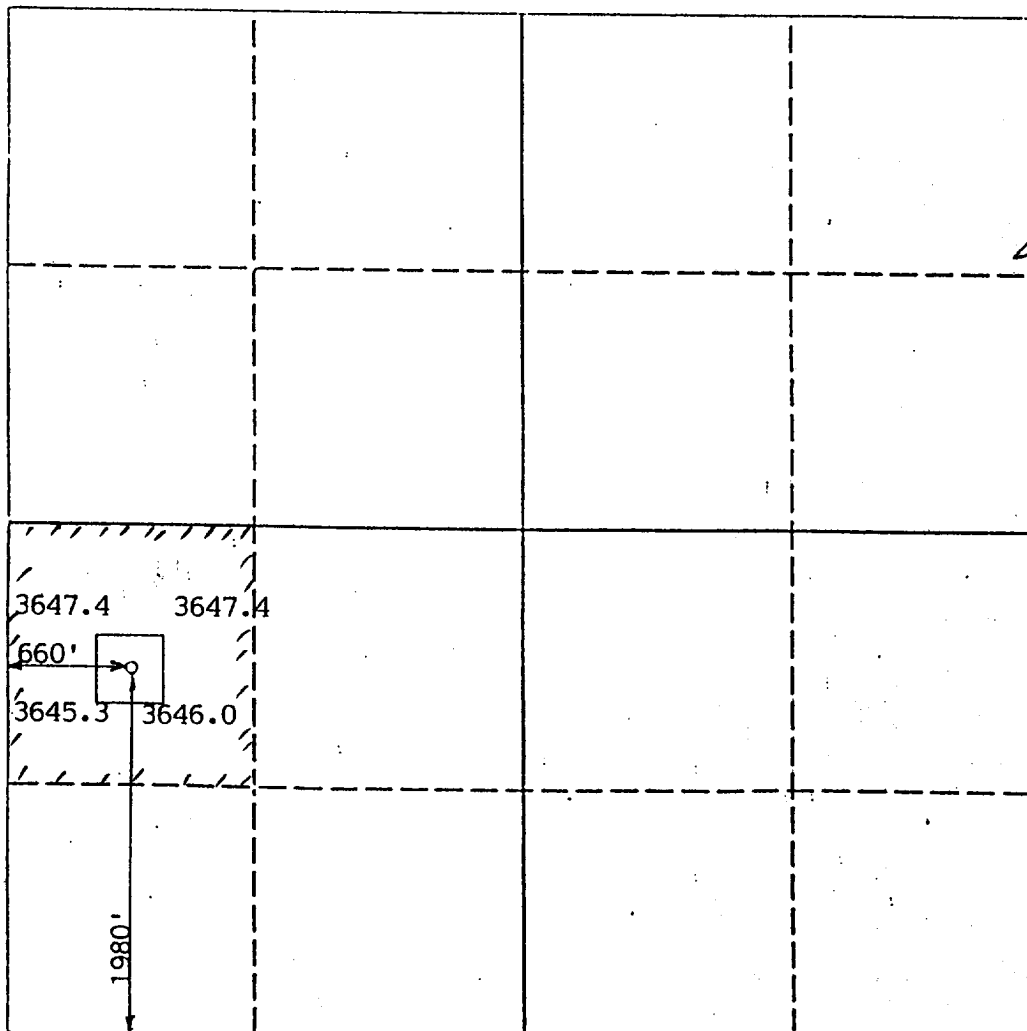
All Distances must be from the outer boundaries of the section

Operator <b>Ray Westall, Operator</b>			Lease <b>Federal "7"</b>		Well No. <b>5</b>
Unit Letter <b>E L</b>	Section <b>7</b>	Township <b>19 South</b>	Range <b>33 East</b>	County <b>NM/M Lea</b>	
Actual Footage Location of Well: <b>1980</b> feet from the <b>South</b> line and <b>660</b> feet from the <b>West</b> line					
Ground level Elev. <b>3646</b>	Producing Formation <b>Delaware</b>	Pool <b>Tonto</b>		Dedicated Acreage: <b>40</b> Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?  
☐ Yes ☐ No If answer is "yes" type of consolidation \_\_\_\_\_

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, force-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



### OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature

Printed Name

**Randall L. Harris**

Position

**Geologist**

Company

**Ray Westall**

Date

**9/10/93**

### SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

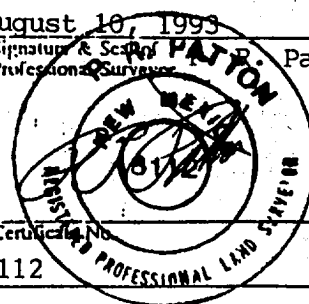
**August 10, 1993**

Signature & Seal  
Professional Surveyor

**R. Patton**

Certificate No.

**8112**

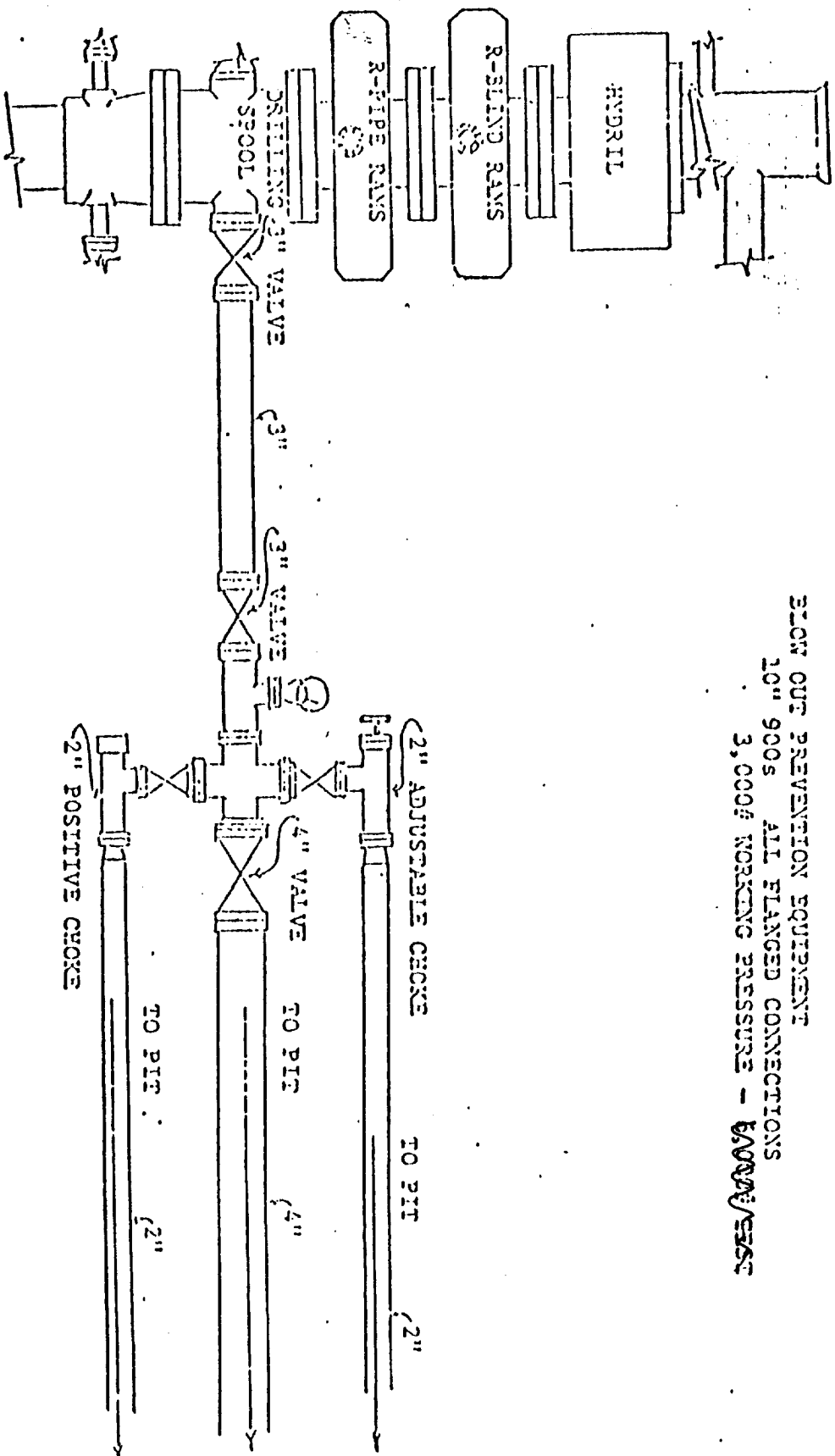


# APPLICATION FOR DRILLING

Ray Westall  
Federal 7 no.5  
Section 7, T19S-R33E  
1980 FSL & 660 FWL  
Lea County, New Mexico  
NM-63026

In conjunction with Form 9-331-c, Application for Permit to Drill subject well, Ray Westall submits the following ten items of pertinent information in accordance with BLM requirements:

1. The geological surface formation is quaternary.
2. The estimated tops of geologic markers are as follows:  
Yates 3470  
Delaware 5800  
Bone Springs 7600
3. The estimated depths at which anticipated water, oil & gas formations are expected to be encountered:  
Water 0-180'  
Oil and Gas zones listed in item #2
4. Proposed casing program: See 9-331-c
5. Pressure Control Equipment: See 9-331-c and exhibit E.
6. Mud Program: Fresh water in surface hole, brine water to TD
7. Auxiliary Equipment: None
8. Logging Program: CNL/FDC/GR, DLL.
9. No abnormal pressures or temperatures are anticipated.
10. Anticipated Starting Date: As soon as possible.



BLOW OUT PREVENTION EQUIPMENT  
 10" 900s ALL FLANGED CONNECTIONS  
 3,000# WORKING PRESSURE - 6000# / 10000#

ATTACHMENT TO FORM C-101