

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

| | |
|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| 1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | 5. Lease Designation and Serial No. NM 56251 |
| 2. Name of Operator RAY WESTALL | 6. If Indian, Allottee or Tribe Name |
| 3. Address and Telephone No. P.O. BOX 4 LOCO HILLS, NM (505) 677-2370 | 7. If Unit or CA, Agreement Designation |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2080' FNL & 660' FEL SEC 12 T19S 32E | 8. Well Name and No. FEDERAL 12 #2 |
| | 9. API Well No. 30-025-32975 |
| | 10. Field and Pool, or Exploratory Area WEST TONTO BONE SPRINGS |
| | 11. County or Parish, State LEA |

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"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| | <input type="checkbox"/> Other | <input type="checkbox"/> Dispose Water |

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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 pertinent to this work.)*

7/14/95 SPUD 17" HOLE @ 4:10 AM
7/15/95 TD 452' RAN 450' 13 3/8 CSG W/475 SX "C" CIRC 110 SX TO PIT
PLUG DN 3:30 PM WOC 18 HRS
7/18/95 TD 3069' RAN 3069' 8 5/8 CSG W/1200 SX "C" CIRC 160S TO PIT
PLUG DN 7:00 PM WOC 18 HRS
PR TEST 5003 HELD 15 MIN
7/26/95 TD 7590' LOGGING
7/27/95 RAN 7590' 5 1/2" 17# CSG W/DV TOOL @ 6895'

1ST STAGE: 135 SX CLASS "H"
2ND STAGE: 560 SX "C" + 165 SX "H"

7/28/95 PLUG DN @ 1:25 AM RELEASED RIG

HOBBS INSPECTION OFFICE
ACCEPTED FOR RECORD

DATE 10-11-95

SIGNATURE URB

RECEIVED
OCT 11 11 28 AM '95
BUREAU OF LAND MGMT
HOBBS, NM

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

Signed Quanel Harper Title PRODUCTION ANALYST Date 09/08/95

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: