

N.M. OIL CONS. COMMISSION
P.O. BO 980
HOBBS, NEW MEXICO 88240

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.
NM 29704

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
South Teas Federal #1

9. API Well No.
30-025-01758

10. Field and Pool, or Exploratory Area
Teas Bone Springs

11. County or Parish, State
Lea County, New Mexico

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
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
Shackelford Oil Co.

3. Address and Telephone No.
3650 Canyon Oaks Dr. Carrollton, TX 75007

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit G Section 23 Teas R33E

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

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Change of operation

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ 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.)*

Change of operator from Woodbine Petroleum, Inc. to
Shackelford Oil Co. effective August 1, 1994

J. Lara
- 9 1994

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

Signed *Shackelford* Title _____ Date _____

(This space for Federal or State office use)

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

STATEMENT ACCEPTING RESPONSIBILITY FOR OPERATIONS

The undersigned accepts all applicable terms, conditions, stipulations, and restrictions concerning operations conducted on the leased land or portion thereof, as described below:

LEASE NO.: NM 29704

LEGAL DESCRIPTION: South Teas Federal #1

Unit G Sec. 23 Teas R33E

FORMATION(S):

Delaware

BOND COVERAGE:

\$25,000 statewide bond

BLM BOND FILE NO.

B03229

AUTHORIZED SIGNATURE:

Don Shackelford

TITLE:

Owner

DATE:

8/11/94

RECEIVED

SEP 18 1894

U. S. DEPT. OF AGRICULTURE
WASHINGTON