Form 3160-5 (June 1990)

U. ED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

. 15 40bus, NM 88241

Mr Older

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

5. Lease Designation and Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS

NM-0587

Do not use this form for proposals to drill Use "APPLICATION FOR	or to deepen or reentry to a different reservoir. PERMIT - * for such proposals	6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE 1. Type of Well 1		7. If Unit or CA, Agreement Designation N. BELL LAKE FEDERAL
1 Name of Operator Americal Hess Corporation		8. Well Name and No. N BELL LAKE FED 3
3. Address and Telephone No.		9. API Well No. 30-025-33077
P. 0. Box 840, Seminole, TX 79360 915-758-6700 License of Well (Footage, Sec., T., R., M., or Survey Description)		10. Field and Pool, or exploratory Area N BELLLAKE ELLENBURGER
1930' FNL & 660'FEL. SEC. 6, T23S. R34E		11. County or Parish, State
:E. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT,	OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	ON O FILLIDAY T
10-21-97 THRU 10-22-97 FLCWING 1348 MCFD @ 820 PSI SALES L PUMPED DWN TBG. 2000 GALS. 15% NEFE W/5 GALS./1000 FOAMER (AF-11) @4.7 PSI TO 0 PSI. ISIP = 0 PSI. CLOSED PUMPED 500 GALS. 15% HCL, 12 BFW, 1 FLOWLINE & PROD. SEPARATOR FLUSH. 0	Abandonment Recompletion Plugging Back Casing Repair Altering Casing X Other ACIDIZE I pertinent details, and give pertinent dates, including estimated date of startitical depths for all markers and zones pertinent to this work.)* INE PRESSURE. MIRU AMERICAN FRACMASTER ON TR. HCL LOADED W/22% METHANOL & DISPLACED W/100 TO 7.5 BPM. PUMPING PRESSURES DROPPED FROM I. MASTER VALVE & OPENED FLOWLINE VALVE. AMERI. 2 BBLS. OF CAUSTIC NEUTRALIZER & 19.5 BFW @ CLOSED IN. FLOWED WELL BACK TO ATMOSPHERIC TAIFLOWING TO SALES @ 3500 MCFD & 800 PSI SALES	EE CAP & BFW LOADED NITIAL OF 980 CAN FRACMASTER 1 BPM FOR
)	ACCEPTED FOR BECORD NOV 1 3 1997	RECEIVED
<u>UU</u>		BLM ROSWELL, NM
14. I bereby certify that the foregoing is true and correct Signed	Title SR. ADMIN. ASSISTANT	Date 10-24-97
This space for Federal or State office use) Approved by Conditions of approval, if any:	Tide	Date