	ARTI	NITED STATE NT OF THE OF LAND MANA	INTERIOR		re- 5. LEASE	DESIGNATION		1	
	NOTIC	ES AND REP	ORTS ON	WELLS 89210)29426-B	OR TRIBE NAM	 IE	
1.	IL [GAS] WITW					7. UNIT AGREEMENT NAME			
2. NAME OF OPERATOR					8. FARM	OR LEASE NAM	E		
Hondo Oil & Gas Company /						H. E. West "B"			
3. ADDRESS OF OPERATOR				RECEIVED	9. WELL	NO.			
P. O. Box 2208, Re		·	a mith and State	- Localitation and a	28				
4. LOCATION OF WELL (Report location clearly and in accordance with any Sta See also space 17 below.) At surface				JUL 07 '89	Gray	Grayburg Jackson J. G. J.A. 11. SEC., T., B., M., OR BLE. AND			
660' FNL & 660' F	EL				80	RVET OR ARMA	uk. And		
				O. C. D.	0.00	0 m170 m	215		
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)			12. COUN	Sec.9-T17S-R31E 12. COUNTY OR PARISH 13. STATE				
		3909	9' GR		Eddy	7	NM		
16. Che	ck App	ropriate Box To 1	ndicate Natur	e of Notice, Report, o		·			
NOTICE O	F INTENTI	ON TO:		SUBE	EQUENT EMPOR	T OF:			
TEST WATER SHUT-OFF	PC	LL OR ALTER CASING		WATER SHUT-OFF		REPAIRING W	ELL		
FRACTURE TREAT	71.0	LTIPLE COMPLETE		FRACTUBE TREATMENT	<u>X</u>	ALTERING CA	BING		
SHOOT OR ACIDIZE		ANDON*		SHOOTING OR ACIDIZING	X	ABANDONMEN	T*		
REPAIR WELL (Other)	ј сн	ANGE PLANS	ļ ļ	(Other)(Note: Report res Completion or Reco	ults of multipl	e completion o	n Well		
17. DESCRIBE PROPOSED OR COMPLE proposed work. If well is nent to this work.) *	TED OPERA	TIONS (Clearly state ally drilled, give subs	all pertinent det urface locations	alls, and give pertinent da and measured and true ver	tes, including	rt and Log for estimated date or all markers	m.) of starting a and zones per	iny rti-	
6/20/89	Acidiz acid.	ed perfs. 32 Swabbed well	270-3823' l back.	2 holes. Swabbe with 15,000 gal. 0 gal. 30# gel +	15%				
		sand. Flowed							
					•	i	교		
							0		
							EIVE		
						6a	Ψ		
						<u>.</u>	i i		
18. I hereby certify that the fore	going is t	rue and correct						_	
SIGNED Sise	Doka		TLE Engi	neering Technici	an DA	TE 6/28/	89	· —	
(This space for Federal or St	ate office	·	TLE	Ą					
CONDITIONS OF APPROVA	L, IF AN				DA	**************************************	·		
						0 0 Can			

*See Instructions on Reverse Side

SJS Carbbaad