(Formerly 9-331) DEPARTI	MEI OF THE INTER U OF LAND MANAGEMEN	Topics. Our MISSION	5. LEASE DESIGNATION	No. 10040135
(Do not use this form for propos Use "APPLICA	ICES AND REPORTS of sals to drill or to deepen or plug ation for PERMIT " for such a	ON MELESE10 back to a different RECEIVED	NM-10190 6. IF INDIAN, ALLOTTE	E OR TRIBE NAME
OIL X GAS OTHER			7. UNIT AGREEMENT NA	ME
2. NAME OF OPERATOR		NOV 30 '89	East Shugart	Unit
Hondo Oil & Gas Compa 3. ADDRESS OF OPERATOR	ny /		9. WMLL NO.	
P. O. Box 2208, Roswe. 1. LOCATION OF WELL. (Report location of See also space 17 below.) At surface	11, NM 88202 learly and in accordance with any	O. C. D. ARTESIA, OFFICE State regulrements.*	5 10. FIELD AND POOL, O	
380' FNL & 990' FWL			Snugart Yates 11. smc., T., R., M., OR B SURVEY OR ARMA	, 7R, On, Grbg
14. PERMIT NO.	15. BLEVATIONS (Show whether DE		Sec.35-T185- 12. COUNTY OR PARISH	R31E 13. STATE
16. Check Ap		lature of Notice, Report, or O	Eddy	NM
NOTICE OF INTEN	TION TO:	i e	ther Data Out appoint or:	
FRACTURE TREAT	PULL OR ALTER CASING FULTIPLE COMPLETE BANDON*	WATER SHUT-OFF FRACTURE TREATMENT	REPAIRING W	
	HANGE PLANS	SHOOTING OR ACIDIZING X	ABANDONMEN	т•
(Other) 17. DESCRIBE PROPOSED OR COMPLETED OPER proposed work. If well is direction nent to this work.)*		(NOTE: Report results of	of multiple completion of	n Well
10/9/89 Dumpe well.	ed 500 gal. zylene + Started well pumpi	1500 gal. 15% MCA acid	l in	
				RECEIVE
			•	<u> </u>
		Actor		1.63
		自身的 10 x 经自身		5
		Ten or An orthographic	n P	
8. I hereby certify that the foregoing is t	true and correct			
SIGNED Son 6200	.49	roleum Engineer	11/17	/00
(This space for Federal or State office			DATE 11/17	/89
APPROVED BY				
CONDITIONS OF APPROVAL, IF AN	Y;		DATE	

*See Instructions on Reverse Side