

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO

NM-12493

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Puerto Chiquito MAN

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 27 T26N R1E

12. COUNTY OR PARISH 13. STATE

Rio Arriba NM

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

HEBCO OIL COMPANY

3. ADDRESS OF OPERATOR

1012 S. Iron Deming, NM 88030

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 19 below.)
At surface

660/N 1980/W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7303' R.F.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. 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.)*

October 23, 1993: Pulled rods and tubing, ran 4 extra joints of tubing to find TD; didn't touch TD. Pulled 2nd time, tubing thick drilling mud & shale on last last joint. Production Zone: 2,635-48'; left two extra joints making a total 2,649' of tubing; perforations at 2,635'. Replaced pump with new insert pump.

RECEIVED

MAR 02 1994

OIL COMPANY

DEMING

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

SIGNED Barth Charles

TITLE Agent

DATE 12/04/93

(This space for Federal or State office use)

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE Acting Area Manager

DATE 2/17/94

*See Instructions on Reverse Side

NMOCD