

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease

State Fee

5. State Oil & Gas Lease No.

K 5001

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL GAS WELL OTHER

2. Name of Operator
HILLIARD OIL & GAS, INC.

3. Address of Operator
906 Building of the Southwest, Midland, Texas 79701

4. Location of Well
UNIT LETTER 1 FEET FROM THE NORTH LINE AND 500 FEET FROM THE West LINE, SECTION 34 TOWNSHIP 18-N RANGE 4E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
13 191'

7. Unit Agreement Name

8. Farm or Lease Name
UNION-STATE COM

9. Well No.
1

10. Field and Pool, or Wildcat
K-K Bone Spring

12. County
Garfield

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK
- TEMPORARILY ABANDON
- PULL OR ALTER CASING
- OTHER
- PLUG AND ABANDON
- CHANGE PLANS

SUBSEQUENT REPORT OF:

- REMEDIATION WORK
- COMMENCE DRILLING OPNS.
- CASING TEST AND CEMENT JOB
- OTHER alter casing
- ALTERING CASING
- PLUG AND ABANDONMENT

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Spud well 13-1/2" hole to 172'.
2. Drilled 172' hole to 151'. Set 13-1/2" x 18' x 32' N&O casing @ 242'. Cemented w/1000 psi. Class 100, 12 Fluobit/sx. Job complete 10:30 P.M. 6-17-75.
3. Installed 13-1/2" x 18' x 32' overhead. Installed 13-1/2" x 18' x 32' casing w/1000 psi for 30 min. Job o.k.
4. Drilled 11" hole to 5142'. Top of San Andres @ 5041'. Cemented w/2000 psi. Class 100, 12 Fluobit/sx followed w/2000 psi. Job complete 10:30 P.M. 6-17-75.
5. Installed 12"-900 x 10'-00" csg. spool. Installed 12"-900 x 10'-00" casing w/2000 psi. Job o.k.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED John D. Ryan TITLE Manager of Operations DATE 6-17-75

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: