SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or in deepen or plug back to a different reservoir. (Do not use this form for proposals to drill or in deepen or plug back to a different reservoir. (OIL USE "APPLICATION FOR PERMIT" for such proposals.) (OIL WELL OTHER WIW 2. NAME OF OPERATOR HONDO OIL & Gas Company 3. ADDRESS OF OPERATOR P. O. BOX 2208, ROSWell, NM 88202 1. Invation of well. (Report location clearly and in accordance with any State requiremedia: 18 10. Field a See also space 17 below.) At surface ARTESIA, OFFICE Sec. 3. (C. D. 11. SEC., T. SURV.) 14. FERMIT NO. 15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3948' GR Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENSION TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE MILLIPLE COMPLETE FRACTURE TREATMENT K. ABANDON*	DAND FOOL, OR WILDCAT BURG Jackson Sf. Q. G-SA- T., R., M., OR BLE. AND EVET OR ARMA 3-T17S-R31E FY OR PARISH 13. STATE NM
OIL WELL OTHER WIW 2. NAME OF OPERATOR H. D. SADDERS OF OPERATOR H. D. WELL NO. W	OR LEASE NAME . West "B" NO. AND POOL, OR WILDCAT burg Jackson SA Q G-SA T. R., M., OR BLE. AND EVEY OR ARBA 3-T17S-R31E IT OR PARISH 13. STATE NM
Hondo Oil & Gas Company 3. ADDRESS OF DEBATOR P. O. Box 2208, Roswell, NM 88202 1. Indication of the Lit. (Report location clearly and in accordance with any State requiremed by Sec also space 17 below.) At surface 660' FSL & 1980' FEL 14. PERMIT NO. 15. ELEVATIONS (Show whether pr. NT. OR. etc.) 12. COUNTY	West "B" NO. AND POOL, OR WILDCAT BURG Jackson SA 2-5-SA T., R., M., OR BLE. AND BYRT OB ARMA 3-T17S-R31E IY OR PARISH 13. STATE NM
P. O. BOX 2208, Roswell, NM 88202 1. Location of well. (Report location clearly and in accordance with any State requiremedate and surface surface) ACT of the surface of	DAND FOOL, OR WILDCAT BURG Jackson Sf. Q. G-SA- T., R., M., OR BLE. AND EVET OR ARMA 3-T17S-R31E FY OR PARISH 13. STATE NM
11. PERMIT NO. 12. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data 13. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data 14. PERMIT NO. 15. PLEVATIONS (Show whether Dr. RT, OR. etc.) 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data 16. NOTICE OF INTENTION TO: 17. PEST WATER SHUTT-OFF FRACTURE TREAT SHOOT OR ACIDIZE ABANDON* CHANGE PLANS (Other) 17. DESCRIBE PROPUSED OR CHANGE PLANS (Other) 18. OTHER TREATMENT ABANDON* CHANGE PLANS (Other) 19. DESCRIBE PROPUSED OR CHANGE PLANS (Other) 10. DESCRIBE PROPUSED OR CHANGE PLANS (Other) 10. DESCRIBE PROPUSED OR CHANGE PLANS (Other) 11. DESCRIBE PROPUSED FRACTURE TREATMENT X ABONDON* SHOOTING OR ACIDIZING (Other) Geopened & Convert (NOTE: Report results of multiple of completion or Recompletion Report (FORTE: Report results of multiple of completion or Recompletion Report (Other) 16. Other) 17. DESCRIBE PROPUSED OR CHANGE PLANS (Other) Geopened & Convert (NOTE: Report results of multiple of multiple of completion or Recompletion Report (FORTE: Report results of multiple of completion or Recompletion Report (Other) 16. Other) 17. DESCRIBE PROPUSED OR CHANGE PLANS (Other) Geopened & Convert (NOTE: Report results of multiple of mult	T., R., M., OR BLE. AND VET OB ARMA 3-T17S-R31E TY OR PARISH 13. STATE NM
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENSION TO: TEST WATER SHUT-OFF PILL OR ALTER CASING SHOOTING OR ACIDIZE REPAIR WELL CHANGE PLANS (Other) deepened & Convert (Note: Report results of multiple of Convert substance of this work.)* 6/30/89 thru Deepened hole from 3725' to new TD of 3996'. 7/10/89 Acidized open hole from 3716-3994' with 8000 gal. Super X Emuls acid. Swabbed and flowed back. 7/11/89 Perforated 3386-3705' with 6000 gal. 15% NEFE acid. Flowed and swell back. 7/13/89 Reacidized 3386-3705' with 4000 gal. 15% NEFE acid. Swabbed we	TY OR PARISH 13. STATE NM
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: TEST WATER SHUT-OFF FRACTURE TREAT RIPOTO OR ACIDIZE REPAIR WELL (Other) 17. DESCRIBE PROPOSED OR COMPLETED OF RATIONS (Clearly state all pertinent details, and give pertinent dates, including est nent to this work.)* 18. DESCRIBE PROPOSED OR COMPLETED OF RATIONS (Clearly state all pertinent details, and give pertinent dates, including est nent to this work.)* 18. DESCRIBE PROPOSED OR COMPLETED OF RATIONS (Clearly state all pertinent details, and give pertinent dates, including est nent to this work.)* 19. DESCRIBE PROPOSED OR COMPLETED OF RATIONS (Clearly state all pertinent details, and give pertinent dates, including est nent to this work.)* 19. DESCRIBE PROPOSED OR COMPLETED OF RATIONS (Clearly state all pertinent details, and give pertinent dates, including est nent to this work.)* 19. DESCRIBE PROPOSED OR COMPLETED OF RATIONS (Clearly state all pertinent details, and give pertinent dates, including est nent to this work.)* 19. DESCRIBE PROPOSED OR COMPLETED OF RATIONS (Clearly state all pertinent details, and give pertinent dates, including est nent to this work.)* 19. DESCRIBE PROPOSED OR COMPLETED OF RATIONS (Clearly state all pertinent details, and give p	
TEST WATER SHUT-OFF PRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent deports proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for 7/10/89 Acidized open hole from 3716-3994' with 8000 gal. Super X Emuls acid. Swabbed and flowed back. 7/11/89 Perforated 3386-3705' with 6000 gal. 15% NEFE acid. Flowed and swell back. 7/13/89 Reacidized 3386-3705' with 4000 gal. 15% NEFE acid. Swabbed we	3
	ALTERING WELL ALTERING CASING ABANDONMENT* t to WIW completion on Well t and Log form.) stimated date of starting any r all markers and zones perti-
water + 69,420# 20-40 sand. Flowed and swabbed well back. 7/18/89 Ran Guiberson Uni-VI lok-set packer and 111 jts. of 2 3/8" fibe glass tubing. Set both @ 3310'. Ready for injection.	er-
	Post ID-2 8-35-89 Deepen
18. I hereby certify that the foregoing is true and correct	
2010 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u>в</u> <u>8/4/89</u>
(This space for Federal or State office use)	
APPROVED BY TITLE DATE CONDITIONS OF APPROVAL, IF ANY:	

SJS