Form 3160-5 (November 1983)	UN TED STA	1.4.4 (2.4)	SUBMIT IN THEIR	TATE Bu	rm approved. dget Bureau No. 1004-0135 pires August 31, 1985
(Formerly 9=331)	BUREAU OF LAND M		R verse side)	5. LEAS	C DESIGNATION AND BERIAL NO.
SUNDR	NOTICES AND I	£37 to \$17 ± 15 m			029426-B DIAN, ALLOTTEE OR TRIBE NAME
(Do not use this form	for proposals to drill or to "APPLICATION FOR PERM	teenen er tilug beck	r to a different management-		·
1. 6/- GAS			Our II 11 33	11 18 7. UNIT	AGREEMENT NAME
2. H. 2 OF OPERATOR	OTHER		CAA And	8. FARM	OR LEASE NAME
1. ondo Oil & Gas	Company /		Partner	H.	E. West "B"
P. O. Box 2208,	Poswell, NM 8820	)2	RECEIVED	39	NO.
<ol> <li>LOCATION OF WELL (Report S = also space 17 below.)</li> <li>At surface</li> </ol>	location clearly and in accor	dance with any Sta			D AND POOL, OR WILDCAT
1580' FNL & 1980	)' FWL		FEB 1'89	11. B≅C.	Yburg Jackson R-O-(), T., R., M., OR BLE, AND REST OF ARBA
			O. C. D.	'Sec	.9-T17S-R31E
14. P SIT NO.	15. ELEVATIONS (	Show whether pr. RT,	GR. etc.)	12. cou	TY OR PARISH 13. STATE
		3881 GL		Edd	
C	heck Appropriate Box 1	o Indicate Nati			
TEST WATER SHUT-OFF	FULL OR ALTER CAS	ING T		SUBSEQUENT REFOI	
ANACTURE TREAT	MULTIPLE COMPLETI		WATER SHUT-OFF FRACTURE TREATMENT		ALTERING CARING
SHOOT OR ACIDIZE	ABANDON* CHANGE PLANS		SHOOTING OR ACIDIZII	KC X	ABANDONMENT*
(Giber)	CHANGE PLANS		(Other) (Norm: Report	results of multipl	e completion on Well rt and Log form.)
17, DESURINE PROPOSED ON COMP proposed work. If well	LETED OPERATIONS (Clearly st is directionally drilled, give	ate all pertinent de subsurface locations			estimated date of starting any or all markers and zones perti-
nent to this work.) *			and maderica and true	).	or all inarkers and zones perti-
				\ 	
	forated 3253-3420				
wit 400	th 4000 gal. 15% N 0 gal. 15% NEFE a	EFE acid. I	Reacidized 3253 ed well back.	-3420' wit	h
1/26/89 Fra	.c'd 3253-3420' wi	th 60 000 a	al 30# v-linko	.d. god .l.	
	,000# 20-40 sand.	Flowed we	ll back.	u ger +	
				·	
					• •
8. I hereby certify that the for	egoing is true and correct		·		
SIGNED Son C	Diow	TITLE End	gineer	DAT	1/26/89
(This space for Federal or S	State office use)			والمستعدد والأسراء مرادعا	S TON PECCONS
A. ROVED BY	T VIR ANSW	TITLE		DAT	POR RECORD
COMDITIONS OF APPROVE	AL, IN ANY:				l 3 1 1989
	**		D 6.1		-34

\*See Instructions on Reverse Side

SJS

	UN ED STATES ************************************	OR verse side)	Form approved. Budget Bureau No. 1004-013 Expires August 31, 1985  LEASE DESIGNATION AND SERIAL NO.		
SUNDRY NO	TICES AND REPORTS (  posals to drill or to deepen or plug l  CATION FOR PERMIT—" for such p	ON WELLS	F INDIAN, ALLOTTEE OR TRIBE NAME		
OIL GAS OTHER		CAR 2J - HJ	J W THIS CORPEMENT HAME		
2. NAME OF OPERATOR		AR.,	8. FARM OR LEASE NAME		
Hondo Oil & Gas Compa 3. ADDRESS OF OPERATOR	any /	Of Care Connection	H. E. West "B"		
P. O. Box 2208, Roswe Location or Well (Report location See also space 17 below.) At surface	ell, NM 88202 clearly and in accordance with any	RECEIVED	39 10. FIELD AND POOL, OR WILDCAT		
1980' FNL & 1980' FWI		FEB 1'89	Grayburg Jackson O. G. J. J. SEC., T., B., M., OR BLE. AND SURVEY OR ARMA		
14. PERMIT NO.	15. ELEVATIONS (Show whether pr	O. C. D.	Sec.9-T17S-R31E		
	3881 ' GR	, NI. GR, ECCARTESIA, OFFICE	12., COUNTY OR PARISH 13. STATE Eddy NM		
18. Check A	Appropriate Box To Indicate N	lature of Notice, Report, or			
NOTICE OF INT			EQUENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL		
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	X ALTERING CASING		
REPAIR WELL	ABANDON® CHANGE PLANS	SHOOTING OR ACIDIZING	X ABANDONMENT*		
(Other)		(Other)	olts of multiple completion on Well appetion Report and Log form.)		
1/12/89 Acidized 370 well back.  1/13/89 Perforated 3 gal. 15% NEF 1/14/89 Acidized 365 well back.  1/17/89 Perforated 3 1/18/89 Acidized 345 1/19/89 Frac'd 3458-	3700-3815' with 14 hole 00-3815' with 1000 gal 3654-3762' with 36 hole 164-3815' with 6000 gal 36458-3623' with 58 hole 18-3623' with 5000 gal 3612' with 60,000 gal Flowed well back.	. 15% NEFE acid. Fles. Acidized 3654-3 back 20% CRA acid. Floss 15% NEFE acid.	3752' with 1000 owed and swabbed		
SIGNED ON State of APPROVAL, IF	Dice use)	Engineer	DATE 1/19/89  OCCUPANT FOR RECORD  DATE  JAN 3 1.1389		
	*See Instructions	on Reverse Side	STS MRESSON NEW MEXICO		

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.