

**UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
MIDLAND COUNTY, NEW MEXICO**

Form approved.
Budget Bureau No. 42-R1424.

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
HNG OIL COMPANY

3. ADDRESS OF OPERATOR
P. O. Box 2267, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
660' FNL & 1880' FWL

14. PERMIT NO. _____

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3360.6' GR

5. LEASE DESIGNATION AND SERIAL NO.
NM 19623

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Vaca 13 Federal

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Wildcat Atoka

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 13, T25S, R33E

12. COUNTY OR PARISH
Lea

13. STATE
NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF: 1/26/84	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) PB to ATOKA from Morrow <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.)*

2-18-84 Set SV EZ drill ret. at 14,595'; sting into ret., mix and pump 35 sacks Cl-H cont. .5% CFR-2, .2% HA5 mixed at 16.1 ppg leaving 1 bbl on top of ret.

2-21-84 Perforated Atoka with 1-11/16" Dec SlimKone gun at 14,495 - 14,509 feet (15 holes). 2-7/8" 6.5# L-80 tubing at 13,421.84 feet with Baker SA.



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

SIGNED Betty Gildon TITLE Regulatory Analyst DATE 2/29/84
Betty Gildon

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: MAY 17 1984

Carlsbad, NEW MEXICO *See Instructions on Reverse Side

M. Hall