## STATE OF NEW MEXICO

EHGY AND MINEHALS DE	PAH	IAIEI
DISTRIBUTION		
SANTA PE	1	
FILE	1-	-
U.S.G.S.		
LAND OFFICE		
OPERATOR	سوا	

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DISTRIBUTION  SANTA FE  SANTA FE, NEW M	osact 02 1984	Form C-103 Revised 10-1-78
SANTA FE, NEW M	ARTESIA, OFFICE	State X Fee 5. State Oil & Gas Lease No.
OPERATOR SUPERIOR AND REPORTS ON WE		647
SUNDRY NOTICES AND REPORTS ON WE IDO POT USE THIS FORM FOR PROPOSALS TO DRILL ON TO DELPEN ON PLUE BACK USE "APPLICATION FOR PERMIT " (FORM C-101) FOR SUCH PR	TO A DIFFERENT RESERVOIR.	7. Unit Agreement Name
OIL SAS WELL OTHER. Dryhole . Name of Operator		8. Farm or Lease Name
Hondo Oil & Gas Company		State BV "A"
. Address of Operator		9, well No.
P. O. Box 1710, Hobbs, New Mexico 88240		10. Field and Pool, or Wildcat
UNIT LETTER A 330 FEET FROM THE NORTH	LINE AND 330 FEET FROM	Empire Abo
THE East LINE, SECTION 25 TOWNSHIP 175	,	
15. Elevation (Show whether DF 3663.2' GR	, RT, GR, etc.)	12. County Eddy
Check Appropriate Box To Indicate Nati	ure of Notice, Report or Oth	er Data
NOTICE OF INTENTION TO:	SUBSEQUENT	REPORT OF:
PERFORM REMEDIAL WORK	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT X
PULL OR ALTER CASING CHANGE PLANS	OTHER	
OTHER		
17. Describe Proposed or Completed Operations (Clearly state all pertinent details	s, and give pertinent dates, including	estimated date of starting any proposed
Plugged & abandoned in the following manner:  1. RU, POH w/rods & pump. Installed BOP & POH w/  2. RIH w/cmt retr & set @ 3840'. Established inj  3. Cmt squeezed Abo perfs 3918-82' w/45 sx C1 H c  4. Circulated hole w/salt gel 3800-1026'. Spotte surface w/brine water 25#/bbl salt gel.  5. Rem BOP, cut off wellhead below ground level, surface.  6. Installed regulation dry hole marker. Cleaned Final Report.	compl assy.  jection rate into Abo permt. Dumped 5 sx C1 H or and 25 sx cmt plug 1026-8  cleaned out cellar & sp	erfs 3918-3982'. emt on top of retr. 326'. Circ hole 826' to botted 10 sx cmt @
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18. I hereby certify that the information above is true and complete to the best of	my knowledge and belief.	<del></del>
*1640 Eijahelh J. Bench vire I	Drlg. Engr.	9/28/84
CONDITIONS OF APPROVAL, IF ANY	Chologist	10·29·84