

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions  
reverse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Change of Operator	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Hondo Oil and Gas Company	8. FARM OR LEASE NAME H. E. West B
3. ADDRESS OF OPERATOR 105 East 3rd, Suite 415, Roswell, NM 88201	9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2005' 20005' FNL & 660' FWL	10. FIELD AND POOL, OR WILDCAT Grayburg Jackson-7R, O.G.S.A.
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4, T-17S, R-31E
15. ELEVATIONS (Show whether Dr., H., or, etc.) O.C.D. ARTESIA, OFFICE	12. COUNTY OR PARISH Eddy
	13. STATE NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETION	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANE	<input type="checkbox"/>
(Other) Change of Operator	<input checked="" type="checkbox"/>		

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input 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.)

The parties listed below wish to notify this Commission of the change of operator for the well described above.

From: Arco Oil and Gas Company, a Division of Atlantic Richfield Company  
P. O. Box 1610  
Midland, Texas 79702

TO : Hondo Oil and Gas Company  
105 West 3rd Street, Suite 415  
Roswell, New Mexico 88201

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

SIGNED Layne Collins

TITLE Production Clerk

DATE 3/20/87

(This space for Federal or State office use)

APPROVED BY Orig. Sec. Linda E. C. Randall

TITLE

DATE 5-15-87

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

Form 9-331  
Dec. 1973Form Approved.  
Budget Bureau No. 42-R1424UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## 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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☐ other Water Injection Well2. NAME OF OPERATOR ARCO Oil & Gas Company ✓  
Division of Atlantic Richfield Company

3. ADDRESS OF OPERATOR

P. O. Box 1710, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 2005' FNL &amp; 660' FWL

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH: As above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON\* ☐

(other)

SUBSEQUENT REPORT TO:

☐☐☐☐☐☐☐☐

Reset pkr, convert to single WIW.

5. LEASE

LC-029426-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

H. E. West "B"

9. WELL NO.

6

10. FIELD OR WILDCAT NAME

Grayburg Jackson (OGSA)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

4-17S-31E

12. COUNTY OR PARISH

Eddy

13. STATE

N. M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

GL

RECEIVED

JUN 4 1980

U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

1. Rigged up on 5/13/80. POH w/pkr & tbg. Install BOP.
2. RIH w/ Model "R" pkr on 2-3/8" OD tbg, set pkr above perms @ 3112'.
3. Circ 2-3/8"x7" annulus w/corrosion inhibited wtr. Pressured up on 4 1/2" csg liner to 500# for 30 mins, OK.
4. Connected up wellhead for single water injection, well in Grayburg Jackson zone. Returned to injection on 5/14/80.

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JUN 9 1980

O. C. D.  
ARTESIA, OFFICE

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED George H. Stewart TITLE Sr. Dist. Prod. Superv DATE 6/3/80

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) GEORGE H. STEWART TITLE AGING DISTRICT ENGINEER DATE JUN 05 1980

CONDITIONS OF APPROVAL, IF ANY: