The I hereby certify that the foregoing by true and correct SIGNED (This space for Federal or State office use) APPROVED BY	TITLE Production Superintendent ACCEPTED	DATE 8/23/88 POR RECORD DATE
SIGNED DO Wolfs		E DATR 8/23/88
18. I hereby certify that the foresting lasters and correct		জ নি
		RECEIVED Aug 24 11 24 M 16 CARE AREA A AREA AREA
NOTICE OF INTENTION TO: TEST WATER SHUT-OFF PULL OR ALTER CASE FRACTURE TREAT MULTIPLE COMPLET SHOOT OR ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS (Other)	WATER SHUT-OFF TE FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (Note: Report results Completion or Recomple State all pertinent details, and give pertinent dates, subsurface locations and mensured and true vertical B. Drilled 12 1/4" hole to 582' Cemented with 450 sx. Class "C' at shoe. Tested BOP to 500 psi	REPAIRING WELL ALTERING CASING ABANDONMENT* of multiple completion on Well etlon Report and Log form.) including estimated date of starting any i depths for all markers and zones perti-
	O' GL To Indicate Nature of Notice, Report, or C	Eddy NM
į.	(Show whether DF, RT, GR, etc.)	Sec.10-T17S-R31E 12. COUNTY OR PARISH 13. STATE
P. O. Box 2208, Roswell, NM 882 1. Location of Well (Report location clearly and in accordance also space 17 below.) At surface		9. WHILL NO. 32 10. FIELD AND FOOL, OR WILDCAT Grayburg Jackson Sk-7-6 11. SEC., T., B., M., OR BLK, AND
2. NAME OF OPERATOR Hondo Oil & Gas Company 3. ADDRESS OF OPERATOR	SEP 19 '88	8. FARM OR LEASE NAME H. E. West "B"
OIL GAS OTHER		7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to Use "APPLICATION FOR PERM	KIECHKIN CHN WYELLN	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Use "APPLICATION FOR PERM		LC-029426-B

*See Instructions on Reverse Side $$\operatorname{SDS}$$ CARLSBAD, NEW MEXICO