

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other instructions on
reverse side)

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

C15F

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug well to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals.)

RECEIVED

1. OIL ☒ WELL GAS ☐ WELL OTHER ☐
2. NAME OF OPERATOR Hondo Oil & Gas Company
3. ADDRESS OF OPERATOR P. O. Box 2208, Roswell, NM 88202
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
660' FSL & 1980' FWL
14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3848' GR

5. LEASE DESIGNATION AND SERIAL NO.
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.
45
10. FIELD AND POOL, OR WILDCAT
Grayburg Jackson
11. SEC., T., R., E., OR BLK. AND SURVEY OR AREA
Sec. 9-T17S-R31E
12. COUNTY OR PARISH
Eddy
13. STATE
NM

MAY 8 '89

O. C. D.
ARTESIA, OFFICE

SR-4-G-SA

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☒
(Other) ☐
REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(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.) *

4/26/89 Perforated 3634-3728 with 35 holes. Acidized 3634-3728' with 2000 gal. 15% NEFE acid. Swabbed well back.
4/27/89 Reacidized 3634-3728' with 6000 gal. 20% CRA acid. Swabbed well back.

ACCEPTED FOR RECORD

MAR 2 1989

CARLSBAD, NEW MEXICO

RECEIVED
MAY 1 9 39 AM '89

RECEIVED

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

SIGNED Lisa Bohannon TITLE Engineering Technician DATE 4/28/89

(This space for Federal or State office use)

APPROVED BY TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side