

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN THE MANNER
(Other instructions on re-
verse side)

Copy to 87

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-0925	
2. NAME OF OPERATOR Hondo Drilling Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Drawer 2516, Midland, Texas 79702		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' from North Line and 1980' from East Line Unit G		8. FARM OR LEASE NAME Wright Fed. Com.	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3490 ft. GR		10. FIELD AND POOL, OR WILDCAT N. Turkey Track Morrow	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 29-T18S-R29E NMPM	
		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

16. 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"/>	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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.*

May 24, 1978 - Rigged up pulling unit and picking up 2-3/8" tubing

May 25, 1978 - Drilling out cement to total depth of 11,254 ft.

May 26, 1978 - Pulled 2-3/8" tubing out of hole, perforated well from 11,012' to 014' - 3 holes, 11,016' to 018' - 3 holes, 11,020' to 026' - 7 holes, 11,028' to 036' - 9 holes, 11,146' to 152' - 7 holes, Total: 29-.05 diameter holes. Ran tubing and Guiberson packer in hole, set same at 10,953'.

May 27, 1978 - Treated well with 5,000 gals. 10% Morrow Flo Acid.

May 28, 29, 30 & 31, 1978 - Well flowing KCL water and acid on 1" choke. Gas rate 500 MCF/day.

June 1, 1978 - Well shut in for Bottom Hole Pressure Build-up Test.

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

SIGNED [Signature] TITLE President DATE June 6, 1978

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE ACTING DISTRICT ENGINEER DATE JUN 23 1978

CONDITIONS OF APPROVAL, IF ANY: