

Form 3160-5  
July 1989)  
(Formerly 9-331)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING  
OFFICE FOR NUM  
OF COPIES REQUIRED  
(Other instructions on re-  
verse side)

BLM Roswell District  
Modified Form No.  
NMXO-3160-4

dsf

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Hondo Drilling Co. ✓		8. FARM OR LEASE NAME Sivley Federal	
3. ADDRESS OF OPERATOR P. O. Drawer 2516, Midland, TX 79702-2516		9. WELL NO. #2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1,980' FNL and 1,980' FEL, Unit Letter G Sec. 30, T-18-S, R-29-E		10. FIELD AND POOL, OR WILDCAT South Loco Hills O.G.S.A.	
14. PERMIT NO. 30-015-22770		15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 3,498'	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T-18-S, R-29-E		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 COMPLETION <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 type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Repentry and Deepen <input checked="" 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.) \*

3-17-90 Rigged up pulling unit. Perforate well 7,726' - 7,732', 7,742' - 7,750', 7,757' - 7,763', total of 20' - 2 shots per foot.

3-18-90 Going in hole with 2 3/8" tubing and Guiberson Packer, set packer at 7,648.29'. Acidize perforations with 1,000 Gal. Halliburton NCID Acid and 75 Ball scalers and swabbing well.

3-19-90 Swabbing well. Acidize well with 1,000 Gal. Halliburton HCI 15% Acid and 5,000 Gal. Mod 101 Acid. Flowing well.

3-20-90 Flowing well and swabbing - 70% oil and 30% acid water.

ACCEPTED FOR RECORD

APR 11 1990

CARLSBAD, NEW MEXICO

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

SIGNED <u>[Signature]</u>	TITLE <u>President</u>	DATE <u>March 30, 1990</u>
(This space for Federal or State office use)		

APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

\*See Instructions on Reverse Side