STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No. B-11535

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 —" (FORM C-101) FOR SUCH PROPOSALS.)

RECEIVED
DEC 28 1979
O. C. D.
ARTESIA, OFFICE

1. OIL WELL [ ] GAS WELL [X] OTHER-

7. Unit Agreement Name

2. Name of Operator: Hondo Oil & Gas Company

8. Farm or Lease Name: Exxon State

3. Address of Operator: Box 1710, Hobbs, New Mexico 88240

9. Well No.: 1

4. Location of Well: UNIT LETTER K, 1900 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 9 TOWNSHIP 18S RANGE 28E NMPM.

10. Field and Pool, or Wildcat: North Illinois Camp- ~~Wildcat~~ Morrow Gas

15. Elevation (Show whether DF, RT, GR, etc.): 3632.4' GR

12. County: Eddy

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [X]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		OTHER [ ]	

17. Describe Proposed or Completed Operations (*Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work*) SEE RULE 1103.

Propose to treat in the following manner:

1. Rig up, kill well, install BOP & press annulus to approx 2500#.
2. Frac treat Morrow perfs 10,322-10,435' w/60,000 gals frac fluid consisting of 40,000 gals Titan II Gel-30, 2 gals flourosurfactant, 2 gal clay stabilizer, 10# B-5/1000 breaker, 7# KCL/bbl, 20,000 gal liquid CO_2, 60,000# sd, 10,000# bouxite, flush w/26 bbls 2% KCL wtr w/6# friction reducer, 3 gals foaming agent & 13 bbls liquid CO_2. Swab back load, return to production.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [signature] TITLE Dist. Drlg. Supt. DATE 12/27/79

APPROVED BY W. A. Gressett TITLE SUPERVISOR, DISTRICT II DATE DEC 28 1979

CONDITIONS OF APPROVAL, IF ANY: