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OPERATOR	1

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

AUG 1 1979

O. C. C.

ARTESIA, OFFICE

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
647

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Hondo Oil & Gas Company ✓	8. Farm or Lease Name Exxon State
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240	9. Well No. 2
4. Location of Well UNIT LETTER <u>F</u> , <u>1980</u> FEET FROM THE <u>West</u> LINE AND <u>1980</u> FEET FROM THE <u>North</u> LINE, SECTION <u>9</u> TOWNSHIP <u>18S</u> RANGE <u>28E</u> NMPM.	10. Field and Pool, or Wildcat Undesignated Morrow Gas
15. Elevation (Show whether DF, RT, GR, etc.) 3634.6' GR	12. County Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☒ Surface
CASING TEST AND CEMENT JOB ☒
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

~~Corrected C-103 to reflect correct name of Operator.~~

On 7/22/79 set 20" conductor pipe @ 30'. Cmdt to surf w/Redi-mix. Spudded 17½" hole @ 10:00 AM 7/23/79. Fin drlg 17½" hole to 417' @ 7:30 PM 7/23/79. RIH w/13-3/8" OD 54.5# K-55 csg, set @ 417'. Cmdt 13-3/8" csg w/450 sx RF cmt, 10# gilsonite/sk, ¼# flocele/sk, 2% CaCl, followed by 100 sx Cl C cmt cont'g 2% CaCl & ¼# flocele/sk. Circ 100 sx cmt to pit. PD @ 12:45 AM 7/24/79. WOC 18 hrs. Pressure tested csg to 1000# 30 mins OK.

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

SIGNED SLK for L.D. Cant

TITLE Dist. Drlg. Supt.

DATE 7/31/79

APPROVED BY W.A. Gussert

TITLE SUPERVISOR, DISTRICT II

DATE AUG 3 1979

CONDITIONS OF APPROVAL, IF ANY: