OMILD OMILA						
DEPARTMENT	OF	THE	INTERIOR			
CEO! OC!	CAL	CHE	VEV			

		•		 •••
5.	LEASE			
	LC-028772 b			
6	IF INDIAN ALLOTT	TT 00	TDIOCA	 _

GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME  007 20 108			
1. oil gas X other	Federal "10"			
2. NAME OF OPERATOR Hondo Oil & Gas Company	1  10. FIELD OR WILDCAT NAME  70			
3. ADDRESS OF OPERATOR	Undesignated Morrow Gas			
P. O. Box 1710, Hobbs, New Mexico 88240  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 10-18S-28E			
AT SURFACE1550' FNL & 660' FWL (Unit Ltr "E") AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	12. COUNTY OR PARISH 13. STATE  Eddy N M			
As above  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO. 30-015-23225			
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)			
CHANGE ZONES ARTESIA, NEW	(NOTE: Report results of multiple completion or zone change on Form 9-330.)  L SURVEY  MEXICO  ermediate Csg & Cmt.  all pertinent details, and give pertinent dates, rectionally drilled, give subsurface locations and to this work.)*  all pertinent details, and give pertinent dates, rectionally drilled, give subsurface locations and to this work.)*  all pertinent details, and give pertinent dates, rectionally drilled, give subsurface locations and to this work.)*  all pertinent details, and give pertinent dates, rectionally drilled, give subsurface locations and to this work.)*  all pertinent details, and give pertinent dates, rectionally drilled, give subsurface locations and to this work.)*  all pertinent details, and give pertinent dates, rectionally drilled, give subsurface locations and to this work.)*  all pertinent details, and give pertinent dates, rectionally drilled, give subsurface locations and to this work.)*  all pertinent details, and give pertinent dates, rectionally drilled, give subsurface locations and to this work.)*			

Subsurface Safety Valve: Manu. and Typ	)e	· · · · · · · · · · · · · · · · · · ·	Set @	F1
18. I hereby certify that the foregoing is	true and correct			
SIGNED Jonne W. Schmid	TITLE Dist. Dr	lg. Supt. DATE	10-17-83	-
	(This space for Federal or St	ate office use)		<del></del>
APPROVED BY	TITLE	DATE	C)	
CONDITIONS OF AFFROVAL, IF ANT:			ACCEPTED FOR RECOR	D

\*See Instructions on Reverse Side

OCT 2 1 1980

ROSWELL, NEW MEXICO