

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form ADI
Project File
LEASE DESIGNATION

NM 0504364-A

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.)

RECEIVED

1. WELL TYPE OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBAL	
2. NAME OF OPERATOR HILLIARD OIL & GAS, INC. ✓		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 906 Bldg. of the Southwest, Midland, Texas 79701		8. FARM OR LEASE NAME Gulf-Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL & 1980' FWL		9. WELL NO. 1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Wildcat	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3503' GR		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 35, T-19-S, R-25-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	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other)	

(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.) *

Due to the immediate shortage of rotary drilling rigs, we may spud this well with a cable tool drilling rig.

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

SIGNED <i>[Signature]</i>	TITLE <u>Manager of Operations</u>	DATE <u>1-25-74</u>
(This space for Federal or State office use)		
APPROVED BY <i>[Signature]</i>	TITLE <u>DISTRICT ENGINEER</u>	DATE <u>JAN 28 1974</u>
CONDITIONS OF APPROVAL, IF ANY:		

RECEIVED