

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instruction on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 purposes.)

RECEIVED

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 0353184	
2. NAME OF OPERATOR HNG Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 2267, Midland, Texas 79702		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 660' FEL, Sec. 25		8. FARM OR LEASE NAME Bowden "25" Federal Com	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 3362		10. FIELD AND POOL, OR WILDCAT Black River/Atoka	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 25, T-24-S, R-26-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:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<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.)*

- Squeeze the Atoka perforation at 11,210-220 with 75 sack of Class "H" and 1/4#/sx Floccel or set CIBP 50' above perfs & dump 35' of cmt on top.
- Spot a 25 sack plug at 9128 up to 8968, this is 75' below liner top at 9053 and 85' on top of liner.
- Trip in hole with tubing to 50' below casing cut and spot 35 sack Class "H". If casing is cut off below 3000'; then we will spot additional 50 sack plug in the open hole.
- Spot a 65 sack Class "H" cement plug @ 2214 to 2114. This is 50' below 10-3/4" casing shoe.
- Spot a 20 sack Class "H" cement plug at surface.
- Install plate on casing & install dry hole marker.
- Clean up location.

DEC 5 1979

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED M.C. Carile

TITLE Comp. Eng

DATE 12/3/79

(This space for Federal or State office use)
(Orig. Sgd.) GEORGE H. STEWART

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: