

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPL  
(Other instructions on  
reverse side)

Copy to SF  
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 proposals.)

RECEIVED

|                                                                                                                                                                                         |                                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER Dry Hole                                                                                        | 5. LEASE DESIGNATION AND SERIAL NO.<br>N M 0539770                        |
| 2. NAME OF OPERATOR<br>HNG OIL COMPANY                                                                                                                                                  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                      |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 2267, Midland, Texas 79702                                                                                                                          | 7. UNIT AGREEMENT NAME<br>Coles "31" Federal                              |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>860' FNL & 1980' FWL, Sec. 31, T-24-S, R-27-E | 8. FARM OR LEASE NAME<br>Coles "31" Federal                               |
| 14. PERMIT NO.<br>30-01S-21026                                                                                                                                                          | 9. WELL NO.<br>1                                                          |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>3391 GR                                                                                                                               | 10. FIELD AND POOL, OR WILDCAT<br>Crawford/Morrow                         |
|                                                                                                                                                                                         | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Se. 31, T-24-S R-27-E |
|                                                                                                                                                                                         | 12. COUNTY OR PARISH<br>Eddy                                              |
|                                                                                                                                                                                         | 13. STATE<br>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 <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/>        | REPAIRING WELL <input type="checkbox"/>          |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETE <input type="checkbox"/>    | FRACTURE TREATMENT <input type="checkbox"/>    | ALTERING CASING <input type="checkbox"/>         |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input type="checkbox"/>             | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input checked="" type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         | (Other) <input type="checkbox"/>               |                                                  |

(NOTE: Report results of multiple completion or 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.) \*

Work began 7/27/76

1. Cleaned out cellar & welded on Csg. Hd. & installed BOP.
2. Drilled Surface plug, cleaned out to 2260'
3. Spotted 200 sx. class C cement from 2260' to 1640'.
4. Spotted 113 sx. class C cement from 270' to surface.
5. Removed BOP, cut off head & installed dry hole marker.
6. Cleaned location.

Work completed 7/30/76

RECEIVED

MAR 10 1977

U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

RECEIVED

MAR 11 1977  
U.S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

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

SIGNED C. B. Nutter TITLE Production Clerk

DATE 3/8/77

(This space for Federal or State office use)

TITLE

DATE

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side