

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 59387

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Owen Mesa 26 Federal Com.

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Owen Mesa / Atoka /
11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 26, T24S, R29E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

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.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐

2. NAME OF OPERATOR

HNG OIL COMPANY

3. ADDRESS OF OPERATOR

P. O. Box 2267, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
See also space 17 below.)
At surface

1350' FNL & 1880' FEL

RECEIVED BY

JAN 29 1987

ARTESIA OFFICE

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

2967.0' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

Casing test & cement job XX

(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.)

1/20/87 - Set 680 feet of 13-3/8" - 54.50# H-40 ST&C. Cemented with 300 sacks DLW and 200 sacks C1 C. Circulated 107 sacks to surface. 30 minutes pressure tested to 500# OK. WOC 23 hours.

ACCEPTED FOR RECORD

JAN 26 1987

CARLSBAD, NEW MEXICO



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

SIGNED Betty Gildont Betty Gildont TITLE Regulatory Analyst

DATE 1/21/87

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side