

Form 9-331
 Dec. 1973

Form Approved.
 Budget Bureau No. 42-R1424

UNITED STATES
 DEPARTMENT OF THE INTERIOR
 GEOLOGICAL SURVEY

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.)

1. oil well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR

HCW Exploration, Inc.

3. ADDRESS OF OPERATOR

P.O. Box 10585 Midland, Texas 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 464' FSL & 1817' FWL of Sec.

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) Change Operator

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.)*

Currently the operator of record on NM-21169 is Lyco Energy Corporation. Please find enclosed Designation of Operator from Amoco Production Company naming HCW Exploration, Inc. as operator of this well in Sec. 6, T-26-S, R-30-E. Current operations on this well are building of a location for a rotary rig.

5. LEASE

NM-21169

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Amoco A Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Wildcat - Dalhousie

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 6, T26S, R30E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
 3067'

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

Subsurface Safety Valve: Manu. and Type

Set @ 8-3 24 Ft.

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

SIGNED

Steve A. Douglas Steve A. Douglas Operations Manager

DATE 7-11-84

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

NEW MEXICO

*See Instructions on Reverse Side