

Form 9-331  
Dec. 1973

NM OIL CONS. COMMISSION  
Drawer DD  
Artesia, NM 88210

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 a well 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:  
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
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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 - Delaware  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 6, T-26-S R-30-E  
12. COUNTY OR PARISH  
Eddy  
13. STATE  
NM  
14. API NO.  
30-015-24874  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3067 GR

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

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.)\*

Ran tubing and tagged bottom @ 284'. Pumped 60' - 40 sx class "C" neat plug - 284' - 224'. Spot 60' - 40 sx plug class "C" neat - 60' to surface. Cut 12 3/4" casing 3' below ground level. Weld plate on 12 3/4" and installed dry hole marker. Filled cellar and cleaned location.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED Guy E. Greer Guy E. Greer TITLE Production Supt. DATE 5-1-85

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

Post ID-2  
6-7-85  
P & A