

DEPARTMENT OF THE INTERIOR (verse side)
BUREAU OF LAND MANAGEMENT

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM- 012833	
2. NAME OF OPERATOR HEBCO OIL CO.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 2909 DURAZNO EL PASO, TEXAS 79905		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 SW $\frac{1}{4}$ SW $\frac{1}{4}$ 470 / S 660 / W		8. FARM OR LEASE NAME GREVEY	
		9. WELL NO. #1R	
		10. FIELD AND POOL, OR WILDCAT PUERTO CHIQUITO	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 26T 26N R1E	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH RIO ARRIBA	13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☒

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(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.)*

RIG IS CURRENTLY SET UP ON CIDO LEASE
WILL MOVE RIG TO GREVEY1 WHEN CIDO#2 IS
COMPLETED. EST. 45 DAYS WORK HAS BEEN
DELAYED DUE TO ILLNES OF RIG OPERATOR

RECEIVED

JUN 18 1992

OIL CON. DIV
DIST. 3

THIS APPROVAL EXPIRES

OCT 04 1992

RECEIVED
BLM
92 JUN -8 AM 8:42
019 FARMINGTON, N.M.

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

SIGNED

TITLE OWENR

DATE 6/6/92

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

NMOCD

APPROVED

DATE

JUN 12 1992

AREA MANAGER

*See Instructions on Reverse Side