

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

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

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"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR HEBCO OIL COMPANY	8. FARM OR LEASE NAME <i>Federal</i>
3. ADDRESS OF OPERATOR 1012 S. Iron Deming, NM 88030	9. WELL NO. Gran 1R
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>1950/S 510/E</i>	10. FIELD AND POOL, OR WILDCAT <i>East Puerto Chiquito</i> 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>MANCOS</i> Sec21 Twp26N R1E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7445' R.F.
	12. COUNTY OR PARISH Rio Arriba
	13. STATE NM

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.)\*

October 24, 1993: Intended to swab; too much parafin; replaced pump with new pump; ran rods and tubing back in.

**R**  
MAR 02 1994  
OIL CON. DIV.  
BIRMINGHAM

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

SIGNED *Beal Charles*

TITLE Agent

DATE 12/04/93

(This space for Federal or State office use)

APPROVED BY *John A. Hays*

TITLE

*Acting Area Manager*

DATE

*2/17/94*

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOCD