

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

C/27

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back a well or to increase the depth of a well.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED BY  
MAY 02 1984  
O. C. D.  
ARTESIA, OFFICE

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-58237
2. NAME OF OPERATOR Quanico Oil & Gas Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 1714 El Dorado AR 71730	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 660 FSL & 660 FWL of Sec 10	8. FARM OR LEASE NAME Hondo - Federal
14. PERMIT NO.	9. WELL NO. #1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3583 G.L.	10. FIELD AND POOL, OR WILDCAT Windmill - San Andreas
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 10 T15S R28E
	12. COUNTY OR PARISH Chaves
	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) Completion <input checked="" type="checkbox"/>			

(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.)\*

Intend to Complete Hondo Federal #1 well in the San Andreas Formation from 2456' to 2560'.

This well originally drilled by Hondo Fossil Fuels Incorporated. Well has 4 1/2" casing set @ 2616' with 200 sx. This well was temporarily abandoned, but not plugged and at present has never been completed. We have purchased well from present owner, McClellan Oil, and plan to begin completion as soon as possible.

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

SIGNED Doug Allen

TITLE Vice-President

DATE

(This space for Federal or State office use)

APPROVED BY [Signature]  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

MAY 1 1984

\*See Instructions on Reverse Side

Post. 20-3  
5-11-84  
chg. OP.