

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N. M. OIL CONS. COMMISSION
HOBBS, NEW MEXICO 88240

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 Hexagon Oil and Gas Inc.		8. FARM OR LEASE NAME Federal 8
3. ADDRESS OF OPERATOR 1800 W.T.Waggoner Bldg., 810 Houston St., Ft. Worth, TX 76102		9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 460' FSL and 660' FEL		10. FIELD AND POOL, OR WILDCAT Wildcat
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4227' GL; 4240' KB	11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 8, T10S, R31E
		12. COUNTY OR PARISH Chaves
		13. STATE N.M.

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 COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" 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"/>	

(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.)*

Perfs are at 2010'-2018' & 2228'-2238'.
Propose to set CIBP @ 1970' w/35' cement on top.
Cut casing off @ 1720' + 100' cmt cap
Set 45 sx. cement plug @ 1460'.
Spot 15 sx. cement plug @ 63' in top of 8-5/8".
Install dry hole marker top of casing.



Verbal approval obtained on 7/12/88.

18. I hereby certify that the foregoing is true and correct
SIGNED John G. Burke TITLE Vice President DATE 1/05/90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE PETER W. CHESTER

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

FEB 5 1990

*See Instructions on Reverse Side

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA