

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC046164 B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Hamon Operating Company	8. FARM OR LEASE NAME Amerada Federal
3. ADDRESS OF OPERATOR 3900 Rep. Bk. Twr., 325 N. St. Paul, Dallas, Tx. 75201-3502	9. WELL NO. 3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FEL & 1650' FSL, Sec. 17, T-20-S, R-36-E	10. FIELD AND POOL, OR WILDCAT Osudo N. Morrow
14. PERMIT NO. API No. 30 02527132	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T-20-S, R-36-E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3609.1' GR	12. COUNTY OR PARISH Lea
	13. STATE New Mex.

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<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.) *

Morrow perforations are @ 10,986'-10,996' in 4-1/2" liner (T/liner @ 10,623'). There is a permanent packer set in the 7" csg. @ 10,578'.

Operator proposes to P & A as follows:

- Set 50 sack cement plug on top of packer @ 10,578' (T/Morrow @ 10,964')
- Load hole w/ mud. (T/Atoka @ 10,555')
- Set 150' cement plug @ 7600' - 7450' (T/ Strawn @ 10,348')
- Set 150' cement plug @ 5575' - 5425' (B/9-5/8" csg. @ 5510') (T/ Wolfcamp @ 9868')
- Cut & pull 7" csg. @ free point est. to be @ 4600' (T/Bone Spring @ 7046')
- Set 100' Cement plug in & out of 7" stub (T/San Andres @ 4642')
- Set 100' cement plug @ 3000' - 2900' (B/Salt @ 3168')
- Set 100' cement plug @ 1415' - 1315' (B/13-3/8" csg. @ 1365') (T/Salt @ 1848')
- Set 20 sack cement plug @ surface
- Install dry hole marker

Operator plans to start plugging operations as soon as approved by B. L. M.

NOTE: Plugging Contractor will be Baxter Casing Pullers of Midland, Texas.

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

SIGNED B.W. Cozart B.W. Cozart TITLE Dist. Op. Supt. (915/697-1762) DATE 11-07-86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 11-12-86
CONDITIONS OF APPROVAL, IF ANY: