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CIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

3a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. LG 4135	

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-		7. Unit Agreement Name
Name of Operator HNG OIL COMPANY		8. Farm or Lease Name San Simon 5 State
Address of Operator P. O. Box 2267, Midland, Texas 79702		9. Well No. 2
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>north</u> LINE AND <u>1980</u> FEET FROM <u>east</u> <u>5</u> <u>22S</u> <u>35E</u> THE <u>LINE</u> SECTION <u>TOWNSHIP</u> RANGE <u>NMPM</u>		10. Field and Pool, or Wildcat East Grama Ridge Morrow
15. Elevation (Show whether DF, RT, GR, etc.) 3621.2' GR		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: 1/5/84

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Corrected TD at 13,250'

1-21-84 - 4-1/2" 13.5# N-80 LT&C Liner set at 13,247 with top at 10,688. Cemented with 475 Sx. C1 H at .6% Halad 22, .4% CFR2 & 3#/sx. KCL-mixed at 16.0 ppg. 30 minutes pressure tested to 1500#. WOC - 19 hours.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Betty Gildan TITLE Regulatory Analyst DATE 2/2/84  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE FEB 6 1984  
CONDITIONS OF APPROVAL, IF ANY: