

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

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. 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 <input type="checkbox"/>	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
Location of Well UNIT LETTER <u>B</u> <u>2</u> 1980 FEET FROM THE north LINE AND 1980 FEET FROM east 5 TOWNSHIP 22S RANGE 35E NMPM.			10. Field and Pool, or Wildcat East Grama Ridge Morrow
11. Elevation (Show whether DF, RT, GR, etc.) 3631' GR			12. County Lea

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

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 Amend casing setting depth <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

17. 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.

To change 13-3/8" 48# to setting depth of 1150 feet circulated to surface with 1350 sacks.

To amend Elevation to show 3631' GR.

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

SIGNED Betty Sildon TITLE Regulatory Analyst DATE 11/17/83
Betty Sildon

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE NOV 21 1983

CONDITIONS OF APPROVAL, IF ANY: