

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SURMIT IN TRIPPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

16138

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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
HNG OIL COMPANY

3. ADDRESS OF OPERATOR
P. O. Box 2267, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FSL & 660' FWL, Sec. 34

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Pitchfork 34 Federal Com.

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT
Wildcat Morrow

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 34, T24S, R34E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3394' GR

12. COUNTY OR PARISH 13. STATE

Lea

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF: 12/15/82

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) Casing test and cement job.

(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.)*

1-22-83 - TD at 15,435'.

1/26/83 - Set 4-1/2" Liner at 15,435'. S-95, 15.10#. Top of liner at: 12,721'.

Cemented with 475 sacks C1 H cement.

1/2 hour pressure tested to 2000#. WOC 21-1/2 hours.

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

SIGNED

Betty Gildon

TITLE Regulatory Analyst

DATE 1/27/83

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF

(ORIG. SGD.) DAVID R. GLASS

APPROVAL, IF ANY:
JAN 28 1983

MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO

See Instructions on Reverse Side

RECEIVED

JAN 28 1983

OIL & GAS
MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO