

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
N. H. HALL, DIRECTOR
P. O. BOX 1980
HOBBS, NEW MEXICO 88240

LEASE DESIGNATION AND SERIAL NO.

NM 19858

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. 25

5. LEASE AGREEMENT NAME

6. FARM OR LEASE NAME
Madera Ridge 25 Federal Com.

7. WELL NO.
1

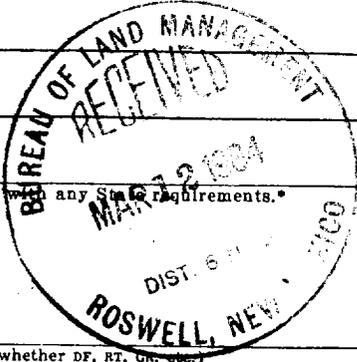
8. FIELD AND POOL, OR WILDCAT
Pitchfork Ranch Morrow

9. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 25, T24S, R33E

10. COUNTY OR PARISH
Lea

11. STATE
NM

12. ELEVATIONS (Show whether DF, RT, GR, etc.)
3556' GR



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"/>	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 type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) casing test and cement job. <input checked="" type="checkbox"/>	

(Other) _____

SUBSEQUENT REPORT OF: 2/13/84

(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.)*

2-27-84 - Set 13,420 feet of 7" 26# P-110. Cemented with 750 sacks pacesetter lite and 1/4# cello-seal mixed at 12.4 and 400 sacks Class H plus 1.25% CF-9 plus 2% KCL mixed at 15.6. 30 minutes pressure tested to 2000#. WOC - 24-1/4 hours.

18. I hereby certify that the foregoing is true and correct
SIGNED Betty Gordon TITLE Regulatory Analyst DATE 3/9/84

(This space for Federal or State office use)
ACCEPTED FOR RECORD
APPROVED BY GWD TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

MAY 15 1984

*See Instructions on Reverse Side

Carlsbad, NEW MEXICO