

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-78

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

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.)

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator HNG OIL COMPANY	8. Farm or Lease Name Moore 34 Com.
3. Address of Operator P. O. Box 2267, Midland, Texas 79702	9. Well No. 1
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 THE <u>east</u> LINE, SECTION <u>34</u> TOWNSHIP <u>24S</u> RANGE <u>34E</u> NMPM.	10. Field and Pool, or Wildcat Pitchfork Ranch /Morrow/
15. Elevation (Show whether DF, RT, GR, etc.) 3401.6' GR	12. County Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF: 3/20/84

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 JOB <input checked="" 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.

4-18-84 - 3-1/2" Liner set at 15,370'. Top of liner at 13,209'. C-75 10.3# cemented with 250 sacks Class H cement. 30 minutes pressure tested to 2000#. WOC - 25-1/4 hours.

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

SIGNED <u>Betty Galdon</u>	TITLE <u>Regulatory Analyst</u>	DATE <u>4/24/84</u>
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT 1 SUPERVISOR		
APPROVED BY _____	TITLE _____	DATE <u>APR 26 1984</u>
CONDITIONS OF APPROVAL, IF ANY:		