

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR HNG OIL COMPANY		8. FARM OR LEASE NAME Diamond 31 Federal Com.	
3. ADDRESS OF OPERATOR P. O. Box 2267, Midland, Texas 79702		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  1980' FSL & 1980' FWL		10. FIELD AND POOL, OR WILDCAT Pitchfork Ranch /Morrow/	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 31, T24S, R34E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3456.2' GR		12. COUNTY OR PARISH Lea	
		13. STATE NM	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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) <u>Casing test &amp; cement job.</u> <input checked="" type="checkbox"/>	

(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.)\*

10-15-84 - Spud 9:00 a.m. Set 620 feet of 13-3/8" 54.5# K-55 ST&C. Cemented with 265 sacks HLC and 250 Sacks Class C. Circulated to surface. 1/2 hour pressure tested to 500 psi. WOC - 19 hours.

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

SIGNED

Betty Gildon  
Betty Gildon

TITLE

Regulatory Analyst

DATE

10/23/84

(This space for Federal or State office use)

APPROVED BY

[Signature]  
OCT 23 1984

TITLE

DATE

CONDITIONS OF APPROVAL IF ANY

\*See Instructions on Reverse Side

Carlsbad, NEW MEXICO