

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on  
reverse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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  |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>NM 28881                          |  |
| 2. NAME OF OPERATOR<br>HNG OIL COMPANY   |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                     |  |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 2267, Midland, Texas 79702   |  | 7. UNIT AGREEMENT NAME   |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br><br>1980' FSL & 1980' FEL |  | 8. FARM OR LEASE NAME<br>Diamond 30 Federal                              |  |
| 14. PERMIT NO.   |  | 9. WELL NO.<br>1   |  |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>3532.1' GR   |  | 10. FIELD AND POOL, OR WILDCAT<br>Pitchfork Ranch /Morrow/               |  |
|  |  | 11. SEC. T. R., M., OR BLK. AND<br>SURVEY OR AREA<br>Sec. 30, T24S, R34E |  |
|  |  | 12. COUNTY OR PARISH<br>Lea  |  |
|  |  | 13. STATE<br>NM  |  |

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

## SUBSEQUENT REPORT OF: 5/29/85

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

Casing test and cement job.

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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.)\*

6-20-85 - Set 4-1/2" 15.10# P110 SFJP liner at 15,480 feet. Top of liner at 12,960 feet.

Cemented with 325 sacks Class H with .50 of 1% Halad 14, mixed at 15.6 ppg.  
30 minutes pressure tested to 2000#. WOC - 20 hours.

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

SIGNED

*Betty Gildon*  
Betty Gildon

TITLE

Regulatory Analyst

DATE 6/24/85

(This space for Federal or State office use)

APPROVED BY

CONDITIONS *ACCEPTED FOR RECORD*

TITLE

DATE

JUL 1 1985

\*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO