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U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. L-5114	

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 Bell Lake 2 State
3. Address of Operator Box 2267, Midland, Texas 79702		9. Well No. 1
4. Location of Well UNIT LETTER <u>H</u> <u>660</u> FEET FROM THE <u>East</u> LINE AND <u>1980</u> FEET FROM THE <u>North</u> LINE, SECTION <u>2</u> TOWNSHIP <u>25S</u> RANGE <u>33E</u> NMPM.		10. Field and Pool, or Wildcat Wildcat Morrow
15. Elevation (Show whether DF, RT, GR, etc.) 3465' GR		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF: 2/9/81

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"/>	OTHER <input 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.

3-29-81 - Set 4-1/2" 15# P-110 FL4S Liner at 15,809'. TOL at 13,017'.

Cemented w/500 sx Cl H 50-50 POZ 2% gel 1.4% CF-9 mixed at 14.2 ppg.

pressure tested to 1000 psi. WOC 24 hours.

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

SIGNED Betty A. Gildon TITLE Regulatory Clerk DATE 3/31/81

APPROVED BY APR 2 1981 DATE APR 2 1981

CONDITIONS OF APPROVAL, IF ANY: