

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. NM 19623
2. NAME OF OPERATOR HNG OIL COMPANY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 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.* See also space 17 below.) At surface 660' FNL & 1880' FWL		8. FARM OR LEASE NAME Vaca 13 Federal
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3360.6' GR		10. FIELD AND POOL, OR WILDCAT Wildcat Morrow
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13, T25S, R33E
		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:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

SUBSEQUENT REPORT OF: 10-3-83

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

REPAIRING WELL

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ALTERING CASING

REPAIR WELL

CHANGE PLANS

(Other) casing test & cement job.

ABANDONMENT*

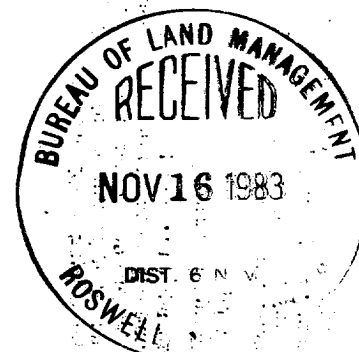
(Other)

(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.)*

11-10-83 - Total depth at 15,948'

11-11-83 - Set 3-1/2" 10.30# C-75 CSCB liner at 15,946 feet. Cemented with 150 sacks Class H 16.0 ppg pressure tested to 2500#. WOC - 19 hours. Top of liner at 14,613 feet.



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

SIGNED

Betty Sildon
Betty Sildon

TITLE Regulatory Analyst

DATE 11/15/83

(This space for Federal or State office use)

(ORIG. SGD.) DAVID R. GLASS

APPROVED BY

DEC 12 1983

TITLE

DATE

CONDITIONS OF APPROVAL

ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

RECEIVED
DEC 14 1983
O.C.D.
MOBES OFFICE