Submit One Copy To Appropriate District Office	State of New Mexico		:	Form C-103
District I	Energy, Minerals and Natural Resources		WELL API NO.	Revised November 3, 2011
1625 N. French Dr., Hobbs, NM District II			30-005-63079	
District II 811 S. First St., Artesia, NM 88210 District III  1220 South St. Francis Dr.		5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 8-410 District IV			STATE FEE 6. State Oil & Gas Lease No.	
District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 83410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR BLUG BACK TO A			V-2982	
SUNDKY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Quincy AMQ State	
PROPOSALS.)  1. Type of Well: ☑Oil Well ☐ Gas Well ☐ Other			8. Well Number #17	
Name of Operator     Hanson Operating Company, Inc.			9. OGRID Number 009974	
3. Address of Operator			10. Pool name or Wildcat	
P O Box 1515, Roswell, New Mexico 88202-1515			00800 Acme San Andres, Southeast	
4. Well Location				
Unit Letter N : 330 feet from the South line and 2310 feet from the West line				
Section 12 Township 8 South Range 27 East NMPM Chaves County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3939' GR				
12. Check Appropriate Box to In	idicate Nature of Notice, R	Leport or Other D	ata	
NOTICE OF INTENTION TO: SUB:			SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR			K ALTERING CASING	
•	CHANGE PLANS	COMMENCE DRILLING OPNS. P AND A		
PULL OR ALTER CASING				
OTHER:     Description   Descr				
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.				
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.  A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the				
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR				
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.				
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and				
other production equipment. This has been cut off at least two feet below ground level.				
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.				
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed				
from lease and well location. For the second removed with the second removed from lease and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have				
to be removed.)  All other environmental concerns have been addressed as per OCD rules.				
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-				
retrieved flow lines and pipelines.  If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well				
li this is a one-well lease or last rer location, except for utility's distribution		ical service poles ar	id lines have been r	emoved from lease and well
When all work has been completed, return this form to the appropriate District office to schedule an inspection.				
SIGNATURE Carol J.	Smith TITLE	Production Analys	t	DATE 6/26/2019
TYPE OR PRINT NAME Carol J. Sn	•	hanson@dfn.co		PHONE: 575-622-7330
For State Lice Only				
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APPROVED BY:	TITLE_	See that it	i i dan ilali	DATE
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