Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
District I – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	·		WELL API NO. 30-005-62794	
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Le	2356
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE STATE	FEE 🗌
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Le	
1220 S. St. Francis Dr., Santa Fe, NM 87505			L-794	
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			7. Lease Name or Unit Agreement Name Hanlad State	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other SWD			8. Well Number #1 SWD	
2. Name of Operator			9. OGRID Number	
Hanson Operating Company, Inc.			009974	·
3. Address of Operator P O Box 1515, Roswell, NM 88202-1515			10. Pool name or Wild Fusselman	dcat
4. Well Location				
Unit Letter <u>K</u> :	1980feet from theSouth_		2310 feet from the	
Section 16	Township 10 South			Chaves County
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF IN		SUB	SEQUENT REPO	RT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	• •	TERING CASING 🔲
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	_	ND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL	CASING/CEMEN	T JOB 📙	
CLOSED-LOOP SYSTEM				
OTHER:		OTHER: M.I.T.	•	\boxtimes
12 Describe managed as severe	lated an artisms. (Classic state of		1	1 1: (: , 1 1 .
13: Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
proposed completion of the				
	ity Test was performed successfull	y and witnessed by I	Dan Smolik, Compliance	Office, District II –
Artesia, NM. Copy of the chart is at	ached.			
		•		
			REC	EIVED
			APR	28 2020
·			EMNRD-0	CDARTESIA
			3	
0/10/1000		10/1/1000		
Spud Date: 8/10/1990	Rig Release D	ate: 10/1/1990		
		L		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Carol J. Smith TITLE Production Analyst DATE 3/9/2020				
Type or print name Carol J. Smith E-mail address: hanson@dfn.com PHONE: 575-622-7330				
For State Use Only				
APPROVED BY:	TITLE CON	nphunee o	DATE_	4-28-20
Conditions of Approval (if any):		, -	•	•

