

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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		6. LEASE DESIGNATION AND SERIAL NO. NM-0175 779	
2. NAME OF OPERATOR TEXACO Inc. (303) 565-8401		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box EE, Cortez, CO 81321		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 1850' FSL & 790' FEL		8. FARM OR LEASE NAME Hanson Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7679' GL		10. FIELD AND POOL, OR WILDCAT Blanco Pictured Cliff	
		11. SEC., T., R. M., OR BLK. AND SURVEY OR AREA Sec. 6-T23N-R1W	
		12. COUNTY OR PARISH Rio Arriba	
		13. STATE New Mexico	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETION	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(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.)*

The subject well has been shut in as an uneconomical gas well since 1975. Purchased from Dome Petroleum in 1984, Texaco Inc. requests approval to plug and abandon the Hanson Federal No. 1. The necessary paperwork has been submitted to our District Office for final Co-owner and Texaco approval. The following plugging procedure is submitted for your approval:

- 1) MIRUSU.
- 2) TIH w/tbg. to 3375'. Spot 65 sacks Class B cement from 3375'. Bradenhead squeeze leaving cement inside casing from 3375' to 3130' KB. (50' above the top of the Ojo Alamo).
- 3) Displace hole w/mud from 3130' to 150'.
- 4) Perforate 4½" casing at 150'. Establish circulation and pump 100 sack cement to surface. Leave cement in casing from 150' to surface. Erect dry hole marker. Clean and restore location.

This Sundry supersedes the Sundry notice dated 7-22-87

RECEIVED
AUG 05 1987
OIL CON. DIV.
DIST. 3
DATE July 30, 1987

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

SIGNED Alan A. Kleier

TITLE Area Superintendent

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

[Signature]
AREA MANAGER

*See Instructions on Reverse Side

BLM(4) NMOGCC(3) LAA-JNH-AAK

NMOCC