Submit 3 Copies To Appropriate District Office District I	State of New Mexico Energy, Minerals and Natural Resou	ırces	Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u>	OIL CONSERVATION DIVISI 1220 South St. Francis Dr. Santa Fe, NM 87505	ON 30-005-6303 5. Indicate Ty STATE	7 pe of Lease
(DO NOT USE THIS FORM FOR PROPOSA	ICES AND REPORTS ON WELLS LS TO DRILL OR TO DEEPEN OR PLUG BACK TO A TION FOR PERMIT" (FORM C-101) FOR SUCH PROPO	V-2982 7. Lease Nam	e or Unit Agreement Name
Name of Operator Hanson Operating Company, Inc.	.IAN 05 2009	9. OGRID No 009974	ımber
3. Address of Operator P. O. Box 1515, Roswell, NM 88		10. Pool nam	e or Wildcat ndres Southeast
4. Well Location Unit Letter E : 1650 feet from the North line and 990 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.) 3968' GR Pit or Below-grade Tank Application □ or Closure □ Pit type Depth to Groundwater >100' Distance from nearest fresh water well >2 miles Distance from nearest surface water >10 miles Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material			
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING PEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB OTHER: 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
Temporarily abandon well as follows:			
10/30/2008: MIRU. Set CIBP at 2050' with 35' cement cap. RIH with tubing. Evaluate for Queen recompletion. Request to Temporarily Abandon until recompletion attempt.			
REQUISES MIT & CHART			
,		ACCEPTED F	OR RECORD
		6 MAL	2009
I hereby certify that the information above is true and complete to the best of my knowledge and heliof. I freshen certify that any pit of below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.			
SIGNATURE Carol J. Smith For State Use Only	E-mail address: hanson@d		DATE <u>12/30/2008</u> ne No. 505-622-7330
APPROVED BY: Conditions of Approval (if any):	TITLE		DATE