

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-10203

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Candy Butte

9. WELL NO.

#2

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 25, T.17N, R.3W

12. COUNTY OR PARISH

Sandoval

13. STATE

New Mexico

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Hanson Oil Corporation

3. ADDRESS OF OPERATOR
P. O. Box 1515, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

660' FNL & 1980' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DE, RT, GR, etc.)

6340' G.L.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other)

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(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.)*

This is a notice of Hanson Oil Corporation's intention to change plans from drilling a 7-7/8" hole to drilling a 6-3/4" hole and using 4 1/2" casing instead of 5 1/2" casing on the above captioned well as originally reported on our Application to Drill.



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

SIGNED A. J. Deane

TITLE Vice-Pres., Drilling & Prod. DATE 12-3-79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: