Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		Revised March 25, 1999 WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-02655	
District III	District III 1220 South St. Francis Dr.		5. Indicate Type of Lease STATE K FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505		E-7179		
SUNDRY 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: West Artesia Grb	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			unit Tr. 5	
PROPOSALS.) 1. Type of Well:				RECEIVED
Oil Well Gas Well Other injection			8. Well No.	MAR - 2 2004
2. Name of Operator Hanson Energy			8. Well No. 11	OCD-ARTE\$1
3. Address of Operator			9. Pool name or Wildo Artesia Qn,G	
R. 342 S. Haldeman Rd. Artesia, NM 88210			Artesia Qii,G	ID, SA
Unit Letter K: 1650 feet from the S line and 1650 feet from the W line				
Section 8		Range 28E		County
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3603' Gr				
11. Check A	ppropriate Box to Indicate N	ature of Notice,	Report or Other Dat	a
NOTICE OF IN			SEQUENT REPO	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	K L ALT	TERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI		JG AND ANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AN		
	COMPLETION	CEMENT JOB		
OTHER: Pressure test		OTHER:		
12. 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				
recompilation.				
2/26/04				
Tested casing to 300# as required by OCD. Test wWitnessed by Mike Bratcher NMOCD. Chart is enclosed.				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE fathe 7	are TITLE P	roduction C	lerk DA	ATE 3/1/04
Type or print name Kathie	Hanso		Talanha	ne No. 746-2262
(This space for State use)	TITLE		1 elepho	IIC IVU.
APPPROVED BY	, certification of the second		*** ·	ALTE.
Conditions of approval, if any:	P IIILE		DA	IE

