

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

NATIONAL CONSERVATION
(Other Instructions
Bureau 440)

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

clsf

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED BY

(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 <input type="checkbox"/>	
2. NAME OF OPERATOR D. L. HANNIFIN OPERATING COMPANY ✓	
3. ADDRESS OF OPERATOR P. O. Box 2588, Roswell, NM 88201	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL, 1980' FWL Section 8, Township 14 South, Range 28 East, N.M.P.M.	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3555' G.R.

5. LEASE DESIGNATION AND SERIAL NO. NM 24681
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME NOLA FEDERAL
9. WELL NO. #3
10. FIELD AND POOL, OR WILDCAT Sams Ranch <i>Artesia</i>
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 8-14-28
12. COUNTY OR PARISH Chaves
13. STATE NM

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 COMPLETE <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"/>	

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"/>	

(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.)*

It is proposed to plug and abandon the Nola Federal #3 in the following manner:

1. Tubing will be run to a depth of 1589' and the hole will be loaded with heavy mud.
2. A 35 sack Class "C" plug will be spotted from 1560' back to approximately 1200'. *Tag plug to at least 1460'.*
3. A 35 sack Class "C" plug will be spotted from 350' to surface.
4. A regulation marker will be erected and the location will be cleaned and leveled and the Bureau of Land Management will be notified for final inspection.

Work is to begin immediately upon approval of this proposal with the required advance notice to the Bureau of Land Management.



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

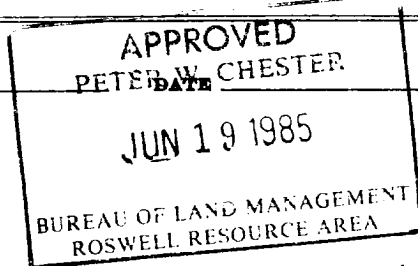
SIGNED *D. L. Hannifin*
(This space for Federal or State office use)

TITLE Operator

DATE June 7, 1985

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE



*See Instructions on Reverse Side