

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

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

45F

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back or to convert a well to a 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. Drawer 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 1980' FSL, 1980' FWL Section 20, Township 14 South, Range 28 East, N.M.P.M.		5. LEASE DESIGNATION AND SERIAL NO. NM 0558973		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3534.5' G.R.		12. COUNTY OR PARISH Chaves		18. STATE NM		7. UNIT AGREEMENT NAME		8. FARM OR LEASE NAME Lillie Federal	
9. WELL NO. #5		10. FIELD AND POOL, OR WILDCAT Sams Ranch		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 20-14-28		13. COUNTY OR PARISH Chaves		17. STATE NM		16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETION	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>	(Other)	<input type="checkbox"/>		<input type="checkbox"/>
(Other)				(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.)*							

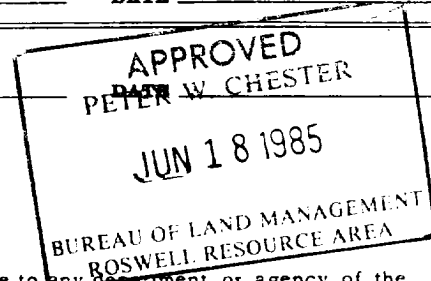
It is proposed to plug and abandon the Lillie Federal #5 in the following manner:

1. Tubing will be run to a depth of 2250' and the hole will be loaded with heavy mud.
2. A 35 sack plug Class "C" will be spotted from 2250' back to approximately 1830'. *Tag plug to at least 2100'.*
- * 3. A 35 sack plug Class "C" will be spotted from 350' back 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.

* *Need cmt. plug behind 4 1/2" casing from at least 300' to 200'.*

18. I hereby certify that the foregoing is true and correct		
SIGNED <i>D. L. Hannifin</i>	TITLE Operator	DATE June 7, 1985
(This space for Federal or State office use)		
APPROVED BY	TITLE	
CONDITIONS OF APPROVAL, IF ANY:		



*See Instructions on Reverse Side