

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 R. Brazos Rd., Aztec, NM 87410

CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

L API NO.

30-005-62042

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Red Lake Ridge

8. Well No.

#1

9. Pool name or Wildcat

San Andres

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Hanson Operating Company, Inc.

3. Address of Operator

P.O. Box 1515, Roswell, NM 88202-1515

4. Well Location

Unit Letter C : 760 Feet From The North Line and 1660 Feet From The West Line

Section 21 Township 8S Range 29E NMPM Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3958

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☒

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

Hanson Operating Company, Inc. plans to plug and abandon the above well in the following manner:

1. Run and set CIBP at 3320' with 25 sxs of cement.
 2. Set 25 sxs cement, plug at 2265' and tag.
 3. Set 25 sxs cement, plug at 390'.
 4. Surface plug 10 sxs cement.
 5. Remove all equipment, install dry hole marker & restore location
- All plugs will be set in place using 9.5# mud ladden fluid, all cement plugs will be Class C cement.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Betsy Speer

TITLE

Production Analyst

DATE

5-16-00

TYPE OR PRINT NAME

Betsy Speer

505-622-7330
TELEPHONE NO.

(This space for State Use)

APPROVED BY

Mike Stillfield

TITLE

Field Rep. II

DATE

5/30/2000

CONDITIONS OF APPROVAL, IF ANY: