

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

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

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

## OIL CONSERVATION DIVISION

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

WELL API NO.

30-005-62341

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

IG-7426

7. Lease Name or Unit Agreement Name

Hanlad "A" State Battery #1

8. Well No.

1

9. Pool name or Wildcat

Diablo 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, New Mexico 88202-1515

4. Well Location

Unit Letter I : 1650 Feet From The South Line and 330 Feet From The East Line

Section 28 Township 10S Range 27E NMPM Chaves County

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

3836' GR

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: Convert to SWD well ☒

#### 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.

OCD Order #R-9156 approval received to convert Hanlad "A" State #1 from a producing well to a Salt Water Disposal well in the following manner:  
Run 2-3/8" plastic-coated tbq. Set pkr @ approx 2000'. Inject in the perf interval f/2034-2082'. Plan to commence work on 07/01/90.

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

SIGNATURE Brenda R. Godfrey TITLE Production Analyst DATE 06/27/90

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY Mick Williams TITLE SUPERVISOR, DISTRICT II DATE JUN 29 1990

CONDITIONS OF APPROVAL, IF ANY: