

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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.	15-030-138200
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B-1969
7. Lease Name or Unit Agreement Name	
Phillips Balding St.	
8. Well No.	5
9. Pool name or Wildcat	Red Lake Q-G-SA
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	2. Name of Operator Hanson Energy
3. Address of Operator R 342 S Haldeman Rd. Artesia, NM 88210	4. Well Location Unit Letter N : 990 Feet From The S Line and 1980 Feet From The W Line Section 15 Township 17S Range 28E NMPM Eddy County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

Intend to go in hole w/ Packer to at least 100' below top of ~~Cement~~ ^{above casing shoe or Top Perforation} and pressure up to test Casing. Will notify OCD before work begins.



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

SIGNATURE Dalton Bell TITLE Agent DATE 1-8-99

TYPE OR PRINT NAME Dalton Bell TELEPHONE NO. 748-2134

(This space for State Use)

APPROVED BY mine superintendent TITLE Field Rep. II DATE 1-11-99

CONDITIONS OF APPROVAL, IF ANY: