

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 3001501382
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Hanson Energy		6. State Oil & Gas Lease No. 1969
3. Address of Operator R. 342 S. Haldeman Rd. Artesia, N. M. 88210		7. Lease Name or Unit Agreement Name: Phillips Balding St.
4. Well Location Unit Letter <u>N</u> _____ feet from the _____ line and _____ feet from the _____ line Section <u>15</u> Township <u>17S</u> Range <u>28E</u> NMPM County <u>Eddy</u>		8. Well No. 5
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. Pool name or Wildcat Redlake, Qn, Gb, S/

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"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Well was placed in production 7/2/00.



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

SIGNATURE Kathie Hanson TITLE Secretary DATE 7/10/00

Type or print name Kathie Hanson Telephone No. 746-2262

(This space for State use)

APPROVED BY Jim W. Seim TITLE District Supervisor DATE OCT 10 2000

Conditions of approval, if any: