

## BUREAU AND MANAGEMENT

## 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" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-068712	
2. NAME OF OPERATOR Hanson Operating Company, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 1515, Roswell, New Mexico 88202-1515		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990' FSL & 990' FWL		8. FARM OR LEASE NAME H & K Federal	
14. PERMIT NO. API #30-015-26307		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3647' GR		10. FIELD AND POOL, OR WILDCAT Redlake Queen	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 11, T. 17S, R. 28E	
		12. COUNTY OR PARISH Eddy	13. STATE New Mexico

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

(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.)\*

- 1) Perforate the Penrose formation f/1598-1616' (19 holes).
- 2) Set RBP @ 1650' to TA Premier perforations (2126-2153').
- 3) Acidize Penrose perforations w/2000 gal 15% NeFe acid.  
Frac w/20,000 gal 70 Quality foam w/34,000# 20/40 sand & 10,000# 20/40 Super LC sand.
- 4) Test formation & put well into production.

RECEIVED

MAR 13 1991

O. C. D.  
ARTESIA, OFFICE

## 18. I hereby certify that the foregoing is true and correct

SIGNED

*Burda R. Godfrey*

TITLE

Production Analyst

DATE

03/06/91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

3/11/91

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side