ACTING DISTRI

L TED STATES SUBMIT IN TRI CATE (Other Instructions on re-

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

GEOLOGICAL SURVEY 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.)						NM-025503 6. IF INDIAN; ALLOTTEE OR TRIBE NAME		
	CLL U OTHER							
Hanson Oil Corporation						8. FARM OR LEASE NAME Ginsberg Federal		
3. ADDRESS OF OPERATOR						9. WELL NO.		
P. O. Box 1515 - Roswell, New Mexico 88201						8		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface						10. FIELD AND POOL, OR WILDCAT		
At Bullace	330' FNL & 330' FEL				11. smc., 1	Shugart 4 md 11. SEC., T., R., M., OR BLE. AND SURVEY OR ARBA Sec. 26, T-185, R-30E		
	Sec. 26,	Sec. 26, T-18-S, R-30-E, NMPM						
	Eddy County, New Mexico							
14. PERMIT NO.		15. ELEVATIONS (S		F, RT, GR, etc.)		Y OR PARISH		
16.	CI I A					ldy	New Mexico	
10.			o Indicate l	Nature of Notice, Report,				
•	NOTICE OF INTE			. 80	BREQUENT REPORT			
TEST WATER SH		PULL OR ALTER CASI MULTIPLE COMPLETE		WATER SHUT-OFF FRACTURE TREATMENT		REPAIRING W		
SHOOT OR ACIDI		ABANDON*		SHOOTING OR ACIDIZING	, —	ABANDONMENT		
REPAIR WELL				(Other) Casi	ng Report			
(Other)				(Note: Report r Completion or Re	esults of multiple ecompletion Report	and Log form	n.)	
10-29-71	org.) -	17-1/2" ho]		200 PM.	vertical depths for	an markers	and zones peru-	
10-30-71	cemented per sx.	w/400 sx.	Hallib Class C	2-3/4", 49# cas urton Light Wei w/2% CaCl + 1/ .C.	ght w/5#	gilson	ite	
10-31-71	to T.D.	1748'. Rar	1738	1000# for 30 mi of 8-5/8", 24# + 2% CaCl. Pl	casing s	et @ 1		
11-01-71		d up on cas anhydrite	_	1100#for 30 min um.	<i>A</i>		rilling	
			R	ECEIVED	Q. 8. 6	37	971	
				NOV 4 1971	ART A			
		r.		O. C. C.			Trof _s o	
18. I hereby certify	1180	/ —		ALL LOUIS				
SIGNED/W/	ala E. Sp	annig son	TITLE	Geologist	DAT	<u> 11-2-</u>	-71	
- APPROVED BY	Federal or State of		TITLE		DAT	io		
CONDITIONS OF	F APPROVAL IF	ANY:						