

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.	30-015-20560
5. Indicate Type of Lease	STATE ☐ FEE ☒
6. State Oil & Gas Lease No.	

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	

7. Lease Name or Unit Agreement Name Louise B. Benson
8. Well No. #1
9. Pool name or Wildcat Shugart- Yates- 7 Rivers

4. Well Location Unit Letter <u>J</u> : <u>2310</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>East</u> Line Section <u>26</u> Township <u>18S</u> Range <u>30E</u> NMPM <u>Eddy</u> County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3473.8' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: Change name of well ☒	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.

Change name of well from:
Louise B. Benson

Change name of well to:
Benson Shugart Waterflood Unit #3

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

SIGNATURE Patricia A. McGraw TITLE Production Analyst DATE June 3, 1993
TYPE OR PRINT NAME Patricia A. McGraw TELEPHONE NO. 505-622-7330

(This space for State Use)
ORIGINAL SIGNED BY MIKE WILLIAMS
SUPERVISOR, DISTRICT II
APPROVED BY _____ TITLE _____ DATE JUN 25 1993
CONDITIONS OF APPROVAL, IF ANY: