

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
NM 62588

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Hanley Federal #1

9. API Well No.
30 015 26068

10. Field and Pool, or Exploratory Area
Shugart, North, Bone Spring.

11. County or Parish, State
Eddy, New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

RECEIVED

FEB 10 1991

O. C. D.
ARTESIA, OFFICE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Hanley Petroleum Inc. ✓

3. Address and Telephone No.

415 W. Wall, Suite #1500, Midland, TX 79701 (915) 684-8051

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FNL & 1932' FWL, Section 7, T-18-S, R-31-E

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
- ☐ Subsequent Report
- ☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
- ☒ Recompletion
- ☐ Plugging Back
- ☐ Casing Repair
- ☐ Altering Casing
- ☐ Other
- ☐ Change of Plans
- ☐ New Construction
- ☐ Non-Routine Fracturing
- ☐ Water Shut-Off
- ☐ Conversion to Injection
- ☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

To treat and test Bone Spring formation from 7698' to 7795

14. I hereby certify that the foregoing is true and correct

Signed Ray D. Compton Title Vice President Production

Date 2-13-91

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date 2/15/91

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side