

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TR (Other instructions on reverse side) CATE*

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-071066

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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7. UNIT AGREEMENT NAME

HANSON FEDERAL (M)

8. FARM OR LEASE NAME

HANSON FEDERAL

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

BRUSHY DRAW (DELAWARE)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 12 - SW/4 of SW/4
T-26-S and R-29-E

12. COUNTY OR PARISH

EDDY

13. STATE

NEW MEXICO

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

CURTIS HANKAMER

3. ADDRESS OF OPERATOR

9039 Katy Freeway, Suite 430, Houston, Texas 77024

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)

At surface

660 feet from South Line and 660' From West Line of Sec. 12

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3005' GL

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐

PULL OR ALTER CASING

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☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

MOVE IN WORKOVER BIG to fish parted tubing out of the hole and restore well to pumping. Work to be commenced 10/30/80.

RECEIVED

NOV 05 1980

O. C. D.
ARTESIA, OFFICE

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

SIGNED

Curtis Hankamer

TITLE

OPERATOR

DATE

Oct. 21, 1980

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side