

Form approved, U.S.F.
Budget Bureau No. 42 R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
OTHER INSTRUCTIONS ON REVERSE SIDE

LEASE DESIGNATION AND SERIAL NO.

LC-068282-B

IF INDIAN, ALLOTTEE OR TRIBE NAME

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. NAME OF WELL ☒ WELL ☐ OTHER Salt Water Disposal Well

2. NAME OF OPERATOR
Hanson Oil Corporation

3. ADDRESS OF OPERATOR
P. O. Box 1515, Roswell, New Mexico 88201

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

1650' FSL & 2310' TEL

14. DEPTH (FEET) 15. ELEVATION (Show whether FE, RL, OR C.C.)

3145' DF

RECEIVED

NOV 13 1979

O. G. C.
ARTESIA, OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hanson Federal

9. WELL NO.

#7

10. FIELD AND POOL OR WILDCAT

No. Mason - Delaware

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

Sec. 25, T.26S, R.31E

12. COUNTY OR PARISH 13. STATE

Eddy

N.M.

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

NOTICE OF INTENTION TO:

WATER SHUT-OFF	PULL OR ALTER CASING
GROUT TREAT	MULTIPLE COMPLETION
STIMULATING FLUID	ABANDON*
REPAIR WELL	CHANGE PLANN
(Other)	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	REPAIRING WELL
GROUT TREAT	ALTERING CASING
STIMULATING FLUID	ABANDONMENT*
REPAIR WELL	

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

17. COMPLETION, REPAIR, 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.)

11-03-79 Replaced packer & replaced 1 jt of tubing (hole in tubing), set @ 4129'.

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

SIGNED *[Signature]*

TITLE Production Clerk

DATE 11-07-79

(Leave space for Federal or State office use)

FORWARDED BY

TITLE

DATE

CONTENTS OR APPROVAL, IF ANY:

*See Instructions on Reverse Side