

(November 1983)

UNITED STATES

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Expires August 31, 1985

RECEIVED BY

DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

NEW OIL COMPLETION

APR 11 1985

NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different interval. Use APPLICATION FOR PERMIT for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.

LC-068282-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

N/A

8. FARM OR LEASE NAME

HANSON FEDERAL

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

North Mason Delaware

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

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

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

1. O. C. D.

WIRELINE OR CASE

OTHER

2. NAME OF OPERATOR

HANSON OPERATING COMPANY, INC. ✓

3. ADDRESS OF OPERATOR

P. O. BOX #1515, ROSWELL, NEW MEXICO 88202-1515

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

330' FSL & 2310' FEL

14. PERMIT NO.

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

3145' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

Propose to perforate f/5050' - 5072' - 1 JSPP.

Acidize new perforations w/2500 gal 15% NE acid.

Swab test & fracture or squeeze perforations, as needed.

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

SIGNED

Brenda Y. Witt

TITLE

Production Analyst

DATE

04/01/85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

4-16-85

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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.