

1. NAME OF WELL
2. LOCATION OF WELL
(See space 17 below.)

UNITED STATES
DEPARTMENT OF THE INTERIOR

3. PERMIT IN TERRITORY OF
(Other than State of New Mexico)
(See space 17 below.)

4. Report Bureau No. 1004-0175
Expires August 31, 1985

95P

BUREAU OF LAND MANAGEMENT

RECEIVED BY

SUNDRY NOTICES AND REPORTS ON WELLS

APR 16 1985

This form is for proposals to drill or to deepen or plug back to a different reservoir.
USE APPLICATION FOR PERMIT— for such proposals.)

5. STATE DESIGNATION AND SERIAL NO.

LC-068282-B

6. IF INDIAN, ALLOTTEE OR TRUST 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., PL., OR BLK. AND
SURVEY OR AREA

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

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

1. OIL ☒ GAS ☐
WELL ☒ WELL ☐
OTHER ☐

2. ARIESIA OFFICE

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 regulations.)
See also space 17 below.)
At surface

330' FSL & 2310' FBL

14. PERMIT NO.

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

3145' GR

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

NOTICE OF INTENTION TO:

WATER SHUT-OFF

FRAC TURE TREAT

SHUT IN ACIDIZE

ABANDON WELL

(Other)

PLUG OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRAC TURE TREATMENT

SHUTTING OR ACIDIZING

(Other) Squeezing

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Note: Report results of multiple completion on Well
Completion or Log completion 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
work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-
nent to this work.)*

Perf f/5050' - 5072' (23 holes).
Acidized w/3,000 gal 15% NE Ac.
Squeezed 150 sx Class "H" cement to 2300#.
Reversed out 1.5 BBLS cement.
Drilled cement. Tested w/600# pressure - held OK.

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

SIGNED

Brenda R. Witt

TITLE

Production Analyst

DATE

04/12/85

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL

TITLE

DATE

APR 15 1985

*See Instructions on Reverse Side