

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐
well well other

JUL 27 1982

2. NAME OF OPERATOR O. C. D.
Hanson Operating Company, ARTESIA OFFICE

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

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) Unit Letter 'H'
AT SURFACE: 2210' FNL & 990' FEL, SE $\frac{1}{4}$ NE $\frac{1}{4}$
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other) Operator Name Change			

5. LEASE
NM-025503

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Ginsberg Federal

9. WELL NO.
#18

10. FIELD OR WILDCAT NAME
Shugart

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 26, T. 18S, R. 30E

12. COUNTY OR PARISH Eddy 13. STATE
New Mexico

14. API NO.
30-015-23994

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3441.5 GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Effective July 1, 1982:

Change Name from: Hanson Oil Corporation
P. O. Box 1515
Roswell, New Mexico 88201

TO: Hanson Operating Company, Inc
P. O. Box 1515
Roswell, New Mexico 88201

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED L. J. Corra TITLE Production Analyst DATE 7/26/82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: