

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. NAME OF OPERATOR HAN-SAN Oil Company	3. ADDRESS OF OPERATOR P.O. Box 349 Deming, New Mexico 88030	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660'/W & 710'/S
14. PERMIT NO.	15. ELEVATIONS (Show surface of ground) 7345' Ground		

5. LEASE DESIGNATION AND SERIAL NO. NM 012833	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME Grevey	9. WELL NO. 1R	10. FIELD AND POOL, OR WILDCAT East Puerto Chiquita <i>Mancos</i>	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 26, T26N-R1E	12. COUNTY OR PARISH Rio Arriba	13. STATE N.M.
--	--------------------------------------	------------------------	---------------------------------	-------------------	--	---	------------------------------------	-------------------

RECEIVED
AUG 25 1983

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(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.)*

1. Set Bridge Plug at 1635'.
2. Perforate one shot per foot: 1542', 1544', 1548', 1552', 1554', 1556', 1558', 1562', 1564', 1580', 1582', 1584', 1594', 1596'. Fourteen [14']
Note: Did not spot acid or acidize.
3. Ran in hole to 1560' with 2 3/8" tubing.
4. Swabbing.

RECEIVED
AUG 30 1983
OIL CON. DJW.
DIST. 3

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

SIGNED W.D. Stricklin TITLE Agent

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE 8/23/83
ACCEPTED FOR RECORD

*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO
BY SMH