

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Expires August 31, 1985

971

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

Brushy Canyon Wildcat

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen a well plugged back to a different reservoir. Use "APPLICATION FOR PERMIT" for such proposals.)

RECEIVED BY

APR 12 1985

O. C. D.

ARTESIA, OFFICE

1. OIL WELL  GAS WELL  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:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other) \_\_\_\_\_

(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.)\*

Acidized w/3500 gals MCA acid.

Brushy Canyon 6300 - 6335' production w/  
Dress Sealing  
3/21/85  
Hitt

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

SIGNED Bunda R. Hitt

TITLE Production Analyst

DATE 02/27/85

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS

ACCEPTED FOR RECORD

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

APR 2 1985

\*See Instructions on Reverse Side