

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-015-30997

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

SPURCK

8. Well Number 9

9. OGRID Number 9946

10. Pool name or Wildcat  
RED LK, QN, GO, SA

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" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other

2. Name of Operator HANSON ENERGY

3. Address of Operator  
P.O. Box 1348 ARTESIA, NM 88211

4. Well Location  
Unit Letter F : 1800 feet from the N line and 2310 feet from the W line  
Section 24 Township 17S Range 27E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3490

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☒ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

CIBP WAS SET AT 1950'. CAP WITH 30' CEMENT. CIRC HOLE  
W/PACKER FLUID. TESTED AT 500 PSI FOR 30 MIN. TESTED GOOD.

REQUEST APPROVAL TO RETEST WELL FOR TA. Will Top off  
CASING WITH 27% KCl AND TEST W/RECORDER AND CHART TO 500#  
FOR 30 MIN.

Upon Successful Test submit Subsequent C-103  
with chart for 1420 T/A.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Kathie Hanson TITLE PRODUCTION CLERK DATE 1/21/08

Type or print name KATHIE HANSON  
For State Use Only

E-mail address: tiwa2@plateau.net Telephone No. 746-2262

APPROVED BY: Gerry Guye TITLE Compliance Officer DATE JAN 22 2008

Conditions of Approval (if any):