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dp

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

JAN 05 '89

O. C. D.

WELL API NO.
30-005-62657

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
L-6278

7. Lease Name or Unit Agreement Name
Hanlad "B" State

8. Well No.
3

9. Pool name or Wildcat
Diablo San Andres

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 Operating Company, Inc. ✓

3. Address of Operator
P. O. Box 1515, Roswell, New Mexico 88202-1515

4. Well Location
Unit Letter A : 780 Feet From The North Line and 990 Feet From The East Line
Section 28 Township 10-S Range 27-E NMPM Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3835' GR

11. 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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☒ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☒
OTHER: ☐

12. 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.

Spud @ 8:00 a.m., 12/17/88.

Ran & cemented 13 jts 8-5/8" 24# ST&C casing. Set @ 509'.

Ran as follows: Guide shoe, 1 jt 8-5/8" csg (35.48), insert FC, & 12 jts 8-5/8" csg (473.99).

Cem as follows: 50 BBLs gelled water ahead, followed by 200 sx Halliburton Lite w/4# flocele, 10# salt/sx & 3% CaCl. Tail in with 200 sx Premium w/2% CaCl. Full returns throughout job. Circ 50 sx to pit. Press to 500 psi & held. WOC 18 hrs.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Brenda K. Godfrey TITLE Production Analyst DATE 01/04/89

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

Original Signed By
Mike Williams

JAN 6 1989

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: