

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1920, 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

MAR - 1 '90

WELL API NO. 30-005-62739
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. LG-7426
7. Lease Name or Unit Agreement Name Hanlad "A" State Battery #2
8. Well No. 12
9. Pool name or Wildcat Diablo San Andres
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3814' GR

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 B : 330 Feet From The North Line and 2224 Feet From The East Line Section 28 Township 10S Range 27E NMPM Chaves County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	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.

Reached TD 2083' 02/21/90.

02/22/90 - Ran csg as follows: 5½" x 8" float shoe, 5½" x 18' shoe joint, 5½" x 18" float collar, 51 jts 5½" 17# J-55 csg. Set @ 2085'.

Cem as follows: Pumpd 60 bbls gelled wtr ahead followed by 200 sx Halliburton Lite w/5# salt & ¼# flocele, followed by 175 sx Premium w/5# salt. Plug dn @ 3:35 p.m. Press to 1100# - held OK. Circ 5 sx cem to pit. WOC 18 hrs.

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

SIGNATURE Brenda R. Godfrey TITLE Production Analyst DATE 02/28/90
TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE MAR 6 1990

CONDITIONS OF APPROVAL, IF ANY: