Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

DEC 20 '89

Form C-103
Revised 1-1-89

WELL API NO.	30-005-62742
5. Indicate Type of Lease	STATE ☐ FEE ☒
6. State Oil & Gas Lease No.	

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 Prep. to P&A	7. Lease Name or Unit Agreement Name: LONG ARROYO
2. Name of Operator: Hanagan Petroleum Corporation	8. Well No.: 3
3. Address of Operator: P.O. Box 1737 - Roswell, NM 88202	9. Pool name or Wildcat: Wildcat - Devonian

4. Well Location
Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West Line
Section 8 Township 12S Range 28E NMPM Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3632 KB

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☒	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		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.

12/19/89 TD 8200' - Devonian Fm, Verbal approval of NMOCD (M. Williams) to plug & abandon in following manner:

100' cmt. plugs, 8100'-8000' (Dev. @ 8054'), 7225-7125 (Strawn @ 7184'), 6075-5975 (Wolfcamp @ 6022), 5125-5025 (Abo @ 5076), 2925-2825' (Glorieta @ 2870), 1600-1500' (8 5/8" csg. @ 1550'), 250', 10 sx. plug w/dry hole marker @ surface. Work to begin immediately.

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

SIGNATURE Michael G. Hanagan TITLE Agent DATE 12/19/89

TYPE OR PRINT NAME Michael G. Hanagan TELEPHONE NO. 623-5053

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II TITLE DATE DEC 26 1989

CONDITIONS OF APPROVAL, IF ANY:

Notify N.M.O.C.D. in sufficient time to witness Plugging