

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-55911

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. TERM OR LEASE NAME

9. Well No.

#1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 19-8S-28E

12. COUNTY OR PARISH 13. STATE

Chaves

NM

OIL ☐ GAS ☐
WELL ☐ 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

1980' FSL and 1980' FEL Unit J NWSE

14. PERMIT NO API#

30-005-62839

15. ELEVATIONS (Show whether OF, RT, GR, etc.)

4021' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) Location Restoration ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(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.)

09/02/91 Dry hole marker has been set.
The pits and location have been shaped back into natural looking contour. All trash, equipment and misc. material has been removed. Location has been reseeded



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

SIGNED

Lisa L. Jennings

TITLE Production Analyst

DATE 09/18/91

(This space for Federal or State office use)

APPROVED BY

Earle Smith

TITLE

Supv Land Minerals

DATE

3-5-97

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side