

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

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

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

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

DEC 16 1991

WELL API NO. 30-005-62877
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. LG-7425
7. Lease Name or Unit Agreement Name Hanlad State Battery #1
8. Well No. #7
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 <u>D</u> : <u>330</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>West</u> Line Section <u>27</u> Township <u>10S</u> Range <u>27E</u> NMPM Chaves County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3837' 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 11-18-91 @ 6:00 am
Ran 12 jts 8-5/8" 24# J-55 csg to 505'.
Cem 200 sx Halliburton Lite w/10# gilsonite, 1/4# flocele & 3%
CaCl₂ P/sx. Pmp 175sx Halliburton Premium w/2% CaCl₂.
Plug dn @ 12:47 12-09-91. Circ. 50 sx 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 Lisa L. Jennings TITLE Production Analyst DATE 12-11-91
TYPE OR PRINT NAME Lisa L. Jennings TELEPHONE NO. 622-7330

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

DEC 19 1991

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____