

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Er ; Minerals and Natural Resources Departmen

Form C-103
Revised 1-1-89

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

WELL API NO. 30-005-62960
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Presler Lake
8. Well No. #4
9. Pool name or Wildcat Many Gates-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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	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>B</u> : <u>1650</u> Feet From The <u>East</u> Line and <u>330</u> Feet From The <u>North</u> Line Section <u>12</u> Township <u>9S</u> Range <u>29E</u> NMPM <u>Chaves</u> County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>4004'</u> GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

1. Spud well on 5-18-93.

2. Ran & cemented 10 3/4" casing as follows: Ran 10 jts. 10 3/4" ST & C 40.5# K-55 casing. Set at 399'. Cement with 350 sx Premium Plus "C" with 2% cacl. Plug on at 12:15 AM 5-19-93. Circulate 85 sx to surface pit. PSI to 600. Held OK. WOC 18 hours.

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

SIGNATURE Patricia A. McGraw TITLE Production Analyst DATE 5/19/93
TYPE OR PRINT NAME Patricia A. McGraw TELEPHONE NO. 505/622-7331

(This space for State Use)

ORIGINAL SIGNED BY
SUPERVISOR, DISTRICT

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAY 28 1993