1.	omerly 9=331) DEPARTME	ENT OF THE INTERI	OR FORM THE D	STUB. LEASE DESIGNATION NM-05876	N AND BERIAL NO.	
	(Do not use this form for proposals	ES AND REPORTS (ON WELLS	6. IF INDIAN, ALLOT	THE OR TRIBE NAME	
ī-	WELL X GAS OTHER WANTE OF OPERATOR Hanson Operating Company, Inc. ADDRESS OF OPERATOR P.O. Box 1515, Roswell, New Mexico 88202, 1515.			7. UNIT AGREEMENT NAME 8. PARM OR LEASE NAME Commanche Federal		
3.				9. WELL NO. #1	l	
4.	LOCATION OF WELL (Report location clear See also apace 17 below.)	10. PIELD AND POOL,	OR WILDCAT			
	DEC 3 0 1993			Wildcat		
	Unit I, 1650' FSL & 990' FEL			SURVEY OR AR	11. SBC., T., B., M., OR BLK. AND SURVEY OR ARMA	
		Sec.12, T.11S, R.25E				
14.	30-005-63000	3542 GL	RT, GR, etc.)	Chaves	New Mexico	
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data					
	NOTICE OF INTENTIO	QUENT REPORT OF:				
	TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF			REPAIRING WELL		
	FRACTURE TREAT MUL	TIPLE COMPLETE	FRACTURE TREATMENT	ALTERING]	
	SHOOT OR ACIDIZE	NDON*	BHOOTING OR ACIDIZING	ABANDONM	ENT*	
	(Other)	NGE PLANS	(Other) Lasing Job	ts of multiple completion	X	
17.	Completion or Recompletion Report and Log form.) 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 gones pertinent to this work.)					
12/13/93 Pulled 25 jts of 8 5/8" casing.						
	Ran and cemented 31 jts of $5\frac{1}{2}$ " 15.5# LT&C J-55 casing as follows: Guide Shoe(.50), 1 jt $5\frac{1}{2}$ " casing(25.42'), float(1.50'), and 30 jt of $5\frac{1}{2}$ " casing(1298.35'). Set at 1313'. Cement as follows: 450 sx of Halliburton Lite with 1/2# Flocele and 5# Gilsonite per sx, followed by 50 sx of Premium Plus with .4 Halad 322, .2/10 Halad 344 with 6# Micro-bond.					
	Plug down at 1	.1:15 AM. PSI to 90	00 and held. Circul	ated 85 sx to p	it.	
					· · · · · · · · · · · · · · · · · · ·	
				>		
8.	I bereby certify that the foregoing is tru					
	SIGNED Catura a. Mc.	Flaw TITLE Produ	uction Analyst	Decemb	per 15, 1993	
	(This space for Federal or State office us	ke)	<u> </u>			
	APPROVED BY	TITLE		DATE		
			1		;	
		*See Instructions	on Reverse Side	C30 23 (203		