That had a Constant			24 the 34 45 A	Delta sp			
to Appropriate District Office		Energy, Minera	is and Natural.	Resources Department	- c15	Revised I-1-89	
DISTRICT 1 P.O. Box 1980, Ho	bba, NM 88240	Our CON	SERVATI P.O. Box 20	ON DIVISIO	WELL API NO.	₩ <i>P</i>	
DISTRICT II P.O. Drawer DD. A	Artesia, NM 88210	Santa Fe	Santa Fe, New Mexico 87504-2088			30-005-63169	
DISTRICT III	•				5. Indicate Type of	STATE X FEE	
1000 Rio Brazos R	d., Aziec, NM 87410				6. State Oil & Gas	Lease No.	
LOO NOT USE	SUNDRY NOTI	CES AND REP	ORTS ON WE	ELLS N OR PLUG BACK TO A			
	DIFFERENT RESER	IVOIR. USE "APPL 101) FOR SUCH P	ICATION FOR P	ERMIT	7. Lease Name or U	Juit Agreement Name	
1. Type of Well: OH. WELL X	GV2		ОТНЕЖ		Han1ad	State	
2 Name of Operator Hanson Operating Company , Inc.					8. Well No.		
3. Address of Ope		cind compa	iny , inc.		9. Pool name or Wi		
P.O. Box 1515 , Roswell, NM 88202-1515					Diablo San Andres		
	r <u>B</u> : 330	Feet From The	North	Line and 2230	Feet From 7	ne West Line	
				077			
Section	28 ////////////////////////////////		.OS F Lion (Show whethe	ange 27E	NMPM	Chaves County	
			3808GR				
11. N	Check A OTICE OF INT			Nature of Notice, Rolling SUB	eport, or Other I SEQUENT RE		
PERFORM REMED	DIAL WORK	PLUG AND A	BANDON [REMEDIAL WORK		LTERING CASING	
TEMPORARILY AB	MANDON [CHANGE PLA	INS	COMMENCE DRILLING	OPNS. P	LUG AND ABANDONMENT	
PULL OR ALTER C	ASING			CASING TEST AND CE	f	_	
OTHER:				OTHER:			
12. Describe Propos work) SEE RUI	ed or Completed Operat LE 1103.	ions (Clearly state all	pertinent details, a	nd give pertinent dates, includ	ding estimated date of s	larring any proposed	
5-6-98	Spudded we	11,PD 196	'Woc 9 h	rs.			
5-7-98	1 insert f Cemented a	loat then s follows +2% Cacl2	11 jts. : 50 sxs . Plug do	g, ran as foll Landed and ce of gel water own at 4:50 pm	emented at ahead then	500'.	
					RECE!	KIECIH KEN	
I hereby certify that th	e information above is true	and complete to the best	of my knowledge and	belia.	·		
SIONATURE	Octor Ja	er _	π	Production	<u>Analyst</u>	_ _{ратв} <u>5-7-98</u> 505-622-7330	
TYPE OR PRINT NAME	Betsy S	peer			-	TELEPHONE NO.	
(This space for State U	ORIGINAL SIG		. GUM				
APPROVED BY	יל וו וטואונוע	,, <u> </u>	m	1.P		DATE 5-20-98	

CONDITIONS OF APPROVAL, IF ANY: