Submit 3 Copies To Appropriate District Office	State of New M	exico	Form C-103
	Energy, Minerals and Nat	ural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 883477			WELL API NO.
District I 1625 N. French Dr., Hobbs, NM District II 1301 W Grand Ave., Artesia, NM 88210 District III MAR 1 2 2000 1220 South St. Francis Dr.			30-025-24866 5. Indicate Type of Lease
District III MAR 12 2009 1220 South St. Francis Dr. Santa Fe. NM 87505		STATE STATE FEE	
		7505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NOBB 87505	350CD		B-1167
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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)			Shell State 8. Well Number
1. Type of Well: Oil Well 🛛 (Gas Well		#1
2. Name of Operator			9. OGRID Number
Hanson Operating Company, Inc.	✓		009974
3. Address of Operator P. O. Box 1515, Roswell, NM 88202-1515			10. Pool name or Wildcat Eunite; San Andres; SW
4. Well Location			San Andres Sw
Unit Letter O :	660 feet from the South	line and 10	650 feet from the East line
Section 36	Township 21 South	Range 36 East	NMPM Lea County
Section 20	11. Elevation (Show whether DE		
3493.2' GR			
Pit or Below-grade Tank Application or			
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INT	TENTION TO:	CLID	SECUENT DEPORT OF
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	SEQUENT REPORT OF: K ☐ ALTERING CASING ☐
	CHANGE PLANS	COMMENCE DRI	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	
•	_		_
OTHER:		OTHER: San Ar	ndres Squeeze and Recompletion 🖂
13 Describe proposed or comple	eted operations (Clearly state all	nertinent details, and	d give pertinent dates, including estimated date
			tach wellbore diagram of proposed completion
or recompletion.			
06/09/2008: MIRU pulling unit. Pull out of hole with rods and pump. ND wellhead. NU BOP. Pull out of hole			
with tubing.	•		•
06/10/2008: Run in hole with cement retainer and set at 3900'. Pressure to 2000#. Held.			
-		Hesitate squeeze	to 1500 psi. Unable to displace. Sting
out and reverse out cement. WOC.			
06/12/2008: Drill out retainer and 2 joints cement. WOC.			
06/13/2008: Drill out to 4150'. Circulate.			
		Perforate 4 sque	eeze holes at 4065' and 4 squeeze holes
at 3780'. Spot 200 gallons acid			
06/17/2008: Perforate 35 holes at 4015'- 4025' and 4030' - 4055'. Acidize with 4,000 gallons 20% acid.			
06/18/2008: Run in hole with	tubing. ND BOP. Run in l	hole with rods an	d pump. NU wellhead. Hang on and
	tubing. ND BOP. Run in l	hole with rods an	d pump. NU wellhead. Hang on and
06/18/2008: Run in hole with	tubing. ND BOP. Run in l	hole with rods an	d pump. NU wellhead. Hang on and
06/18/2008: Run in hole with space out. Start pumping unit.	tubing. ND BOP. Run in la Release rig. RDMO. Place	hole with rods an	d pump. NU wellhead. Hang on and Test and evaluate.
06/18/2008: Run in hole with space out. Start pumping unit. I hereby certify that the information at	tubing. ND BOP. Run in land Release rig. RDMO. Place bove is true and complete to the box	nole with rods and on production.	d pump. NU wellhead. Hang on and
06/18/2008: Run in hole with space out. Start pumping unit. I hereby certify that the information algrade tank has been/will be constructed or cl	tubing. ND BOP. Run in Release rig. RDMO. Place bove is true and complete to the blosed according to NMOCD guidelines.	e on production. best of my knowledged, a general permit	d pump. NU wellhead. Hang on and Test and evaluate. e and belief. I further certify that any pit or belower an (attached) alternative OCD-approved plan .
06/18/2008: Run in hole with space out. Start pumping unit. I hereby certify that the information algrade tank has been/will be constructed or cl	tubing. ND BOP. Run in Release rig. RDMO. Place bove is true and complete to the blosed according to NMOCD guidelines. TITLE	e on production. est of my knowledge pest a general permit Production Analyst	d pump. NU wellhead. Hang on and Test and evaluate. e and belief. I further certify that any pit or belower an (attached) alternative OCD-approved plan . DATE 3/09/2009
06/18/2008: Run in hole with space out. Start pumping unit. I hereby certify that the information al grade tank has been/will be constructed or cl SIGNATURE Type or print name Carol J. Smith	tubing. ND BOP. Run in Release rig. RDMO. Place bove is true and complete to the blosed according to NMOCD guidelines. TITLE	e on production. best of my knowledged, a general permit	d pump. NU wellhead. Hang on and Test and evaluate. e and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan DATE 3/09/2009
O6/18/2008: Run in hole with space out. Start pumping unit. I hereby certify that the information al grade tank has been/will be constructed or cl. SIGNATURE Type or print name Carol J. Smith For State Use Only	bove is true and complete to the blosed according to NMOCD guidelines TITLE E-mail ac	est of my knowledge production a general permit con the production Analyst ddress: hanson@dfm	d pump. NU wellhead. Hang on and Test and evaluate. e and belief. I further certify that any pit or belower an (attached) alternative OCD-approved plan . DATE 3/09/2009 1.com Telephone No. 505-622-7330
O6/18/2008: Run in hole with space out. Start pumping unit. I hereby certify that the information al grade tank has been/will be constructed or closed to the start of the st	tubing. ND BOP. Run in Release rig. RDMO. Place bove is true and complete to the blosed according to NMOCD guidelines. TITLE	e on production. est of my knowledge pest a general permit Production Analyst	d pump. NU wellhead. Hang on and Test and evaluate. e and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan DATE 3/09/2009 1.com Telephone No. 505-622-7330
O6/18/2008: Run in hole with space out. Start pumping unit. I hereby certify that the information al grade tank has been/will be constructed or cl. SIGNATURE Type or print name Carol J. Smith For State Use Only	bove is true and complete to the blosed according to NMOCD guidelines TITLE E-mail ac	est of my knowledge production a general permit con the production Analyst ddress: hanson@dfm	d pump. NU wellhead. Hang on and Test and evaluate. e and belief. I further certify that any pit or belower an (attached) alternative OCD-approved plan . DATE 3/09/2009 1.com Telephone No. 505-622-7330