

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease

State ☒ Fee ☐5. State Oil & Gas Lease No.  
K-6657

## 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator HANSON OPERATING COMPANY, INC.	8. Farm or Lease Name AMOCO STATE
3. Address of Operator P. O. BOX #1515, ROSWELL, NEW MEXICO 88202-1515	9. Well No. #3
4. Location of Well UNIT LETTER <u>I</u> , <u>660</u> FEET FROM THE <u>East</u> LINE AND <u>1980</u> FEET FROM THE <u>South</u> LINE, SECTION <u>10</u> TOWNSHIP <u>9-S</u> RANGE <u>33-E</u> NMPM.	10. Field and Pool, or Wildcat Flying "M" ABO
15. Elevation (Show whether DF, RT, GR, etc.) 4364' GR	12. County Lea

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

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

Drill CIBP @ 9090' & 9040'.  
Perforate 9510 - 9518' w/2 shots p/ft.  
Acidize w/2000 gals 15% HCl & swb test for evaluation.

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

SIGNED Brenda R. Witt TITLE Production Analyst DATE 10/16/84APPROVED BY Operator TITLE Operator DATE OCT 18 1984

CONDITIONS OF APPROVAL, IF ANY: