

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—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-15452-A
2. NAME OF OPERATOR Hanson Operating Company, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A
3. ADDRESS OF OPERATOR P. O. Box 1515, Roswell, New Mexico 88202-1515		7. UNIT AGREEMENT NAME N/A
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1830' FSL & 660' FEL		8. FARM OR LEASE NAME Wildlife Federal
14. PERMIT NO. API #30-025-25042		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4353.6' GR		10. FIELD AND POOL, OR WILDCAT Vada Penn
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T. 9S, R. 33E
		12. COUNTY OR PARISH Lea
		13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING ☒

ABANDONMENT*

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. 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 zones pertinent to this work.)*

Perf Bough "B" f/9443-9446' & 9449-9454' (10 holes).

Acid w/4000 gal 15% NeFe w/additives.

Put well back on production 06/09/89.

18. I hereby certify that the foregoing is true and correct

SIGNED

Brenda G. Godfrey

TITLE

Production Analyst

DATE

06/15/89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

SJS

RECEIVED