

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-4039--A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR ROGER C. HANKS OIL COMPANY		8. FARM OR LEASE NAME Peggy	
3. ADDRESS OF OPERATOR Hobbs Pipe & Supply Company, Box 2010, Hobbs, N. M. 88240		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit F, 1980' FNL & 1980' FWL		10. FIELD AND POOL, OR WILDCAT Vada Penn	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 34-8-35	
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OR PARISH Roosevelt	
		13. STATE N. M.	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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.)*

1. Spotted a 25 sx plug to cover all existing perforations, 9762'-9780'.
2. Loaded hole w/mud-laden fluids.
3. Pulled casing from 5,000'.
4. Spotted a 35 sx plug @ 5-1/2" casing stub.
5. Spotted a 50 sx plug in & out of base of intermediate casing, 4,050'.
6. Spotted a 50 sx plug @ stub of 8-5/8" casing, 800'.
7. Spotted a 50 sx plug in & out of base of surface casing, 417'.
8. Spotted a 10 sx plug @ top & erected a 4" regulation marker.
9. Well was plugged & abandoned on 8/27/73.

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

SIGNED Stanley Sabin TITLE Agent DATE 9/4/73

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY: