(Formerly 9–331)  (Formerly 9–331)  BURE	TMENT OF THE	AGEMENT P	O. BOX 1980		EXPIRES AUGUST  EASE DESIGNATION  M-56277	
SUNDRY NC (Do not use this form for pro-	TICES AND REF	PORTS ON	WELLS	- 88 A.	VA	OR TRIBE NAME
OIL X GAB OTHER			<u></u>	1	HIT AGREEMENT NA	ME
2. NAME OF OPERATOR					V/A abm or lease han	18
Hanson Operating Com	pany, Inc.				KB Federal	<del></del>
P. O. Box 1515, Rosw						
4. LOCATION OF WELL (Report location See also space 17 below.) At surface	clearly and in accordance	er with any State	requirements.*		TELD AND SCOL, OF	
1980' FEL & 6	00' FSL, SW4SE4	, Unit O			llison Penr	
			-		SURVEY OR AREA	
14. FERMET NO.	15. BLEVATIONS (Show	v whether by, ST. 4	e etc)		ec.17,T.8S,	
API #30-041-20833	4038 GR		-,,	1	cosevelt	New Mexic
16. Check A	opropriate Box To la	ndicate Natur	e of Notice, Report,	or Other I	) Onto	
NOTICE OF INTE				REBOURNT RI		
TEST WATER SEUT-OFF	PULL OR ALTER CASING		WATER SEUT-OFF		BEPAIRING W	REL
PRACTURE TREAT	MULTIPLE COMPLETE		PRACTURE TREATMENT		ALTERING CA	BING
REPAIR WELL	ABANDON* CHANGE PLANE		SHOOTING OR ACIDIZING (Other)		abandonmen:	r•  XX
(Other)			(NOTE: Report re Completion or Rec	sults of mul	tiple completion e	n Well
2 - Filled	d fill @ 125'. d hole f/125' to ad cellar and le		/50 sx cement.			
18. I hereby certify that the foregoing is	11	LE Produc	ion Analyst	1	DATE 10/05	/88
(This space for Federal or State office	e ase)			<u> </u>		
APPROVED BY	TIT	LE to bluggin	g of the well bores retained until		ATE APPROV	/ED
CONDITIONS OF APPROVAL, IF A	Approve	ed as to plugging under bond is	retained units completed.		PETER W. C.	TLO I D
	surface	e learn.		1	OCT 19	1988
	*See Inst	tructions on R	everse Side	1		-
Title 16 11 S.C. Service 1001	it a crima tar anu non	enn kanniaat	and mills-tt-	BU	REAU OF LAND	URCE AREA
Title 16 U.S.C. Section 1001, makes United States any faise, fictitious or	fraudulent statements	s or represents	tions as to any matter	to any deg within its	jurisdiction.	ncy of the

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OCT 24 1988

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Form 9-330 (Rev. 5-63)

#### UI FED STATES N. M. CHENTAN CONTROL THE DEPARTMENT OF THE INTERIOR TO 30 reverse side

Form approved. Budget Bureau No. 42-R355.5.

11/04/88

DATE .

structions on 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEMOBBS, NEW MEXICO 88240 NM-562776. IF INDIAN, ALLOTTEE OR TRIBE NAME WELL COMPLETION OR RECOMPLETION REPORT AND LOG\* 1a. TYPE OF WELL: WELL X 7. UNIT AGREEMENT NAME N/A b. TYPE OF COMPLETION: EN DEED-PLUG BACK NEW X DIFF. RESVR. Other Plugged & Abandoned FARM OR LEASE NAME 2. NAME OF OPERATOR MKB Federal Hanson Operating Company, Inc. 9. WELL NO. 3. ADDRESS OF OPERATOR 1 P. O. Box 1515, Roswell, New Mexico 88202-1515 10. FIELD AND POOL, OR WILDCAT 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\* Allison Penn At surface 1980' FEL & 660' FSL, SW4SE4, Unit O 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA At top prod. interval reported below Sec.17, T.8S, R.37E At total depth 14. PERMIT NO. DATE ISSUED 12. COUNTY OR 13. STATE PARISH 30-041-20833 06/16/88 Roosevelt New Mexico 15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 19. ELEV. CASINGHEAD 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\* 06/29/88 4038' GR 08/18/88 N/A - P&A'd 09/26/88 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY 20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD ROTARY TOOLS CABLE TOOLS 365 N/A 0 - 365'WAS DIRECTIONAL SURVEY MADE 24. PRODUCING INTERVAL(S), OF THIS COMPLETION-TOP, BOTTOM, NAME (MD AND TVD)\* N/A No 26. TYPE ELECTRIC AND OTHER LOGS RUN 27. WAS WELL CORED N/A No CASING RECORD (Report all strings set in well) 28. CABING SIZE WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING RECORD AMOUNT PULLED N/A 29 LINER RECORD 30. TUBING RECORD SIZE TOP (MD) BOTTOM (MD) DEPTH SET (MD) SACKS CEMENTS SCREEN (MD) PACKER SET (MD) SIZE N/AN/A 31. PERFORATION RECORD (Interval, size and number) ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. N/A DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED N/A 33. PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping-size and type of pump) WELL STATUS (Producing or shut-in) P&A'd N/A DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL-BBL. GAS-MCF. WATER-BBL. GAS-OIL RATIO TEST PERIOD TOTAL EU HOR RECURS OIL GRAVET FAPI (160 HES) FR FLOW. TUBING PRESS. CASING PRESSURE CALCULATED OIL--BBL. GAS-MCE WATER-BEL 24-HOUR RATE 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST W TNESSED BY NOV 14 1988 35. LIST OF ATTACHMENTS 36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available regregavely RESOURCE AREA

TITLE

Production Analyst

# NSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to beat, are also be precised, either are shown below or will be Issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

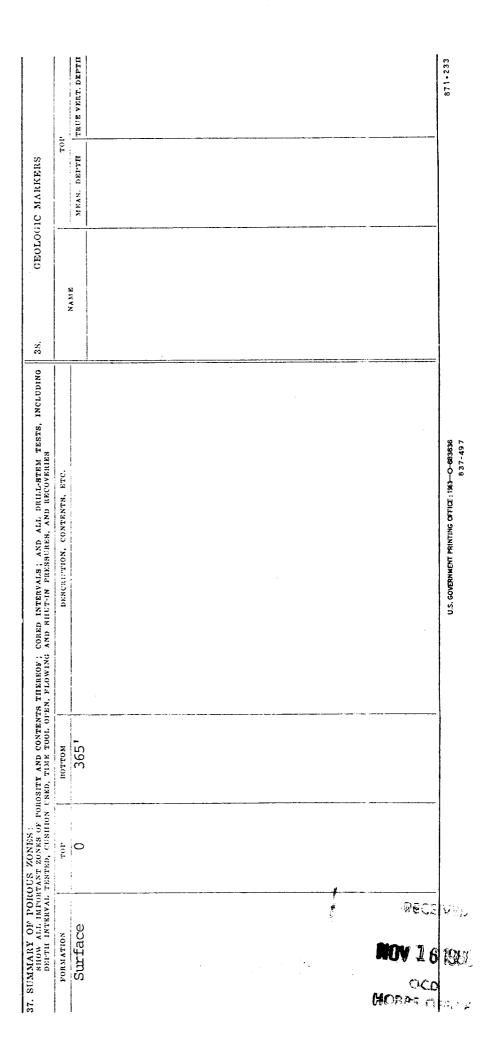
If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Ifem 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal and are specific instructions.

Ifem 8: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Items 22 and 24: If this well is completed for separate produced norm more than one interval zone (multiple completion), so state in item 22, and in item 24 show the produced, for each interval to such interval.

Ifem 22: "State Centeral" Attached supplemental records for this well should show the details of any multiple state cenetting and 24 above.)

Ifem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)



	nber 1983) er <b>ly 9–331</b> )	DEPAR	RTMENT OF	THE INTER	M. ULTONIO INTENTA MEDICANIA ME	Manual : F	5. LEASE DESIGNATION	
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	0. Box 1515				2-1515 State requirements.*		1	
Bee	also space 17 below.	)		•	•		Allison Pen	
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AP	I #30-041-20	833	40381	GR	•		Roosevelt	New Mexico
16.		Check	Appropriate Bo	× To Indicate 1	Nature of Notice, Re	port, or O	ther Data	
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8. I here BIGNI	by certify that the Bund	foregoing	is true and correct	· _		<del></del>		···
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COND					duction Analys		PETER W. CHES	STER
COND			ANT:	TITLE	on Reverse Side		pA-PROVE	STER

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any departments of fraudulent statements or representations as to any matter writin its jurisdiction.

Commercy op. 2331   DEPARTMENT FIRE INTERIORS   Commercy op. 2331   DEPARTMENT FOR THE INTERIORS   Commercy op. 2332   DEPARTMENT FOR PROPERTY   Commercy op. 2332   DEPARTMENT FOR PROPERTY   Commercy op. 2332   DEPARTMENT FOR PROPERTY   Commercy op. 2332   DEPARTMENT   DEPART	(This space for Federal or State office use)  APPROVED BY	Very TITLE Production Analys	APPROVED PETER W. CHESTER
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DEPARTMENT F THE INTERIDM OF LOWING ON BUREAU OF L. ND MANAGEMENTP. O. BOX 1930  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.)  7. Unit agreement name  N/A  2. NAME OF OPERATOR  Hanson Operating Company, Inc.  3. Address of Operator  P. O. Box 1515, Roswell, New Mexico 88202—1515  4. Location of Well (Report location clearly and in accordance with any State requirements."  See also space 17 below.)  At surface  1980 FEL & 600 FSL, SWASEA, Unit O  DEPARTMENT F THE INTERIDM OBST. COMMISSION ON MEXICO 88240.  NM—56277  N/A  7. Unit agreement name NKB Federal  9. Wall Mo.  10. FIELD AND FOOL, OR WILDCAT Allison Penn  11. EMC., T., E., M., OR ELK, AND SURVEY OR ARRA			i • • • • • • • • • • • • • • • • • • •
BUREAU OF L. ND MANAGEMENTP. O. BOX 1933  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 OTHER  HAISON OPERATOR  HAISON OPERATOR  P. O. BOX 1515, Roswell, New Mexico 88202—1515  4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*		•	Sec.17,T.8S,R.37E
BUREAU OF L. ND MANAGEMENTP. O. BOX 1930  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.)  7. Unit agreement name  N/A  2. Name of operating Company, Inc.  3. Address of operator  P. O. Box 1515, Roswell, New Mexico 88202-1515  4. Location of well (Report location clearly and in accordance with any State requirements.*  DEPARTMENT F THE INTERID M. Well State requirements.*  S. Lease Designation and Berial NO.  NM-56277  N/A  7. Unit agreement name  N/A  8. FARM OR LEASE NAME  MKB Federal  9. Wall NO.  10. FIELD AND FOOL, OR WILDCAT  Allison Perm	TARO, TET & POO, ERT'	DW4DL4, UNIT U	
DEPARTMENT   THE INTERID   WHENT   S. LEASE DEBIGNATION AND BELIAL HO.   BUREAU OF L. ND MANAGEMENTP. O. BOX 1930   NM-56277     SUNDRY NOTICES AND REPORTS ON WELLS   MEXICO   88240   IF INDIAN, ALLOTTEE OR TRIBE NAME     (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.   N/A     OIL   MELL   OTHER   OTHER   N/A     2. NAME OF OPERATOR   Hanson Operating Company, Inc.   MKB Federal     3. ADDRESS OF OPERATOR   P. O. Box 1515, Roswell, New Mexico   88202-1515   1	See also space 17 below.)	•	
DEPARTMENT   THE INTERIOR   Company   The state			
(Formerly 9-331)  DEPARTMENT F THE INTERIOR OF COMMISSION OF SURFICE OF THE PROPERTY OF 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.)  7. UNIT AGREEMENT NAME  N/A  2. NAME OF OPERATOR  DEPARTMENT F THE INTERIOR OF COMMISSION OF SURFICE OF THE PROPERTY OF SURFICE OF THE PROPERTY OF SURFICE OF THE PROPERTY OF SUCH PROPOSALS.)  5. Leabe designation and seelal NO.  NM-56277  N/A  8. FARM OR LEASE NAME		-•	
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(Formerly 9-331) DEPARTMENT OF THE INTERIOR OF BOY 1930		ND REPORIS ON WELLS """ or to deepen or plus back to a different reco	ervoir.
(Formerly 9-331) DEPARTMENT OF THE INTERIOR OF	Use "APPLICATION FOR I	ID BERGREA SIMBOLINEW WIT.	VICO 992/6 IF INDIAN ALLOTTER OF TRAFF HAVE
i di sa di	SUNDRY NOTICES AN  (Do not use this form for proposals to drill use "APPLICATION FOR	ND MANAGEMENTP. O. BOX 1930  HOBBS_NEW MF1	NIM_56277

BUREAU OF LAND MANAGEMENT
Title 18 U.S.C. Section 1001, makes it a crime tor any person knowingly and willfully to make to any department or agency of the
United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(November 1983) (Formerly 9-331)	DEPARTA	UNITED STAT MENT F THE	LS N.	M. SURMETIAN GRAHMANA Other Instructions	AH.	Expires August	
(				BBS, NEW MEXICO 8			AND BREIZE !
		··-				NM-56277  IF INDIAN, ALLOTTES	OR TRIBE N
		CES AND REI			- 1	•	
(Do not use this	Use "APPLICA"	TION FOR PERMIT—	en or plug back for such prope	to a different reservoir.		N/A	
1.					<del>  7</del>	. UNIT AGREEMENT NA	NE
WELL WELL	OTHER .				l	N/A	
2. NAME OF OPERATOR					8	FARM OR LEASE NAM	IB.
Hanson Opera		ny, Inc.				MKB Federal	
3. ADDRESS OF OPERATOR		•			9	WELL NO.	
		1, New Mexico				1	
4. LOCATION OF WELL (Re See also space 17 belo	w.)	early and in accordan	ce with any Sta	te requirements.*	1	). FIELD AND POOL, OF	
At surface 1980	FEL & 600	' FSL, SWASE	4, Unit O		<u> </u>	Allison Penr	
			:		1	SURVEY OF AREA	LK. AND
						Sec.17,T.8S	.R. 37E
14. PERMIT NO.		15. ELEVATIONS (Short	w whether DF, RT,	GR. etc.)	1	COUNTY OF PARISH	
API #30-041-2	20833	4038' GR		. =,		Roosevelt	New Me
<del></del>		·			<u>-</u> -		INCW I'E
6.	Check App	propriate Box To I	indicate Nati	ire of Notice, Report, o	r Othe	er Data	
N	OTICE OF INTENT	ION TO:	1	AURI	POUBNI	ENFORT OF:	
TEST WATER SHUT-OF	p	LL OR ALTER CASING		WATER SHUT-OFF		repairing w	
FRACTURE TREAT		ULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CA	<del></del>
SHOOT OR ACIDIZE	A1	MANDON*		SHOOTING OR ACIDIZING		ABANDONMEN	<del></del>
REPAIR WELL		HANGE PLANS		(Other)		Spud	X
(Other)				(NOTE: Report rest	nits of a	multiple completion on Report and Log form	n Well
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. I hereby certify that th	e foregoing is t	rue and correct		<del></del>			<del></del>
	day.x		TLE Produ	ction Analyst		DATE 06/29/	88
(This space for Federal	or State office	use)					
ADDDATED DE		guera	TT IN	r		ACCEPTED FOR RECORD	ER
CONDITIONS OF APP	ROVAL, IF AND		TLE		—P	E DATEM CHEST	<del>+</del>
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						1111 5 1988	,
		*See In	structions on	Reverse Side		JNF 2 1888	•

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any gays simblified States any false, ficultious or fraudulent statements or representations as to any matter within its jurisdiction.

RECEIVED

JUL 6 1988 OCS HOBBS OFFICE Form 3160-3 (November 1983) (formerly 9-331C)

### ~ ′′. 1980 P. O.

SUBMIT IN " ICATE\*

30-041-20833

700

5. LEASE DESIGNATION AND SERIAL NO.

HOBBUNIFUDMETICOES8240	(Other instr. as on reverse side)	Budget Bureau No. 1 Expires August 31, 1
DEPARTMENT OF THE INTERIOR	_	

BUREAU OF LAND MANAGEMENT NM-56277
6. IF INDIAN, ALLOTTEE OR TRIBE NAME APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK 1a. TYPE OF WORK DRILL 🗵 7. UNIT AGREEMENT NAME DEEPEN [] PLUG BACK b. TYPE OF WELL OIL WELL X MULTIPLE ZONE WELL \_ 8. FARM OR LEASE NAME 2. NAME OF OPERATOR MKB Federal 9. WELL NO. Hanson Operating Company, Inc. 3. ADDRESS OF OPERATOR P.O. Box 1515, Roswell, New Mexico 88202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*) 10. FIELD AND POOL, OR WILDCAT Allison <del>North</del> Y 1980' FEL & 660' FSL, SW/4SE/4, Unit O At proposed prod. zone Sec. 17-8S-37E same 14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE® 12. COUNTY OR PARISH | 13. STATE 14 miles southeast of Milnesand, NM Roosevelt MM 15. DISTANCE FROM PROPOSED \*
LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT 16. NO. OF ACRES IN LEASE 17. NO. OF ACRES ASSIGNED TO THIS WELL 660 **'** 120.0 80.0 (Also to nearest drig, unit line, if any) 18. DISTANCE FROM PROPOSED LOCATION®
TO NEAREST WELL, DRILLING, COMPLETED, 19. PROPOSED DEPTH 20. ROTARY OR CABLE TOOLS 1320' OR APPLIED FOR, ON THIS LEASE, FT. + 9620 Rotary 21. ELEVATIONS (Show whether DF, RT, GR, etc.) 22. APPROX. DATE WORK WILL START\* 4038' GL June 15, 1988 PROPOSED CASING AND CEMENTING PROGRAM SIZE OF HOLE SIZE OF CASING WEIGHT PER FOOT SETTING DEPTH QUANTITY OF CEMENT 17 1/2" 3/8" 48# 3501 300 Sx Class"C" Cir. to top 12 1/4" 800 Sx Class"C" Cir. 24# 4200' to top 400 Sx Class"民管 7 7/8" 15.5# or 11.6# 9580 D m Mud Program: 350' Spud with Spud Mud - 4,200' Native Mud & Brine - 7,500' Native Mud & Brine - 9,600' Salt Water Mud, Vis. 35.5, wt. 10.0#, with 2-3% oil, BOP Program: BOP will be installed on 8 5/8" casing and tested daily. IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any. 24. Drilling & Production Supt. DATE 5-12-88 (This space for Federal or State office use) PERMIT NO. **JUN 1** 6 1988 S/Phil Kirk Area Manager CONDITIONS OF APPROVAL, IF ANY: APPROVAL OF THIS APPLICATION DOES NOT WARRANT OR PLEASE BE ADVISED THAT THERE WILL BE NO EXCAVATION

TITLE TO THOSE RIGHTS IN THE SUBJECT LEASE WHICH WOULD TITLE TO THOSE RIGHTS IN THE SUBJECT LEASE WHICH See Instructions PARMINGESide

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ENTITION THE SUBJECT LEASE WHICH SEE IN THE SUBJECT LEASE WHICH LEAS

OF FEDERALLY OWNED MINERAL MATERIAL FOR CONSTRUC-

TION OF THE ACCESS ROAD OR PAD WITHOUT PAYMENT

CERTIFY THAT THE APPLICANT HOLDS LEGAL OR EQUITABLE

Form 3160-3

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

P. O. BOX 1980

SUBMIT IN T. CATE\* (Other instructions on reverse side)

Form approved. Budget Bureau No. 1004-0136 Expires August 31, 1985

# Form 3160-3 (November 1983) HOBBS, NEW MEXICO 88240 (formerly 9-331C) UNITED STATES DEPARTMENT OF THE INTERIOR

				_			5. LEASE DI	BIGNATION	AND SERIAL NO.
		LAND MANA						56277	
_ APPLICATIO	N FOR PERMIT	TO DRILL,	DEEPE	N, OR I	PLUG	BACK	6. IF INDIA	N, ALLOTTE	OR TRIBE NAME
1a. TYPE OF WORK								·	
b. TYPE OF WELL	RILL 🔀	DEEPEN		PL	.UG BA	ACK □	7. UNIT AG	REEMENT N	AME
oir 🗗	DAS		SIN	GLE _	MULT	IPLE [7			
2. NAME OF OPERATOR	WELL OTHER		ZON		ZONE		8. FARM OR	LEASE NA	KE
Ronadero Co	ompany, Inc.						9. WELL NO		
3. ADDRESS OF OPERATOR	ompany, Inc.	· · · · · · · · · · · · · · · · · · ·					9. WELL NO	<b>).</b>	
P.O. Box 43	30. Roswell NM	88202					10. FIELD A	No most o	
4. LOCATION OF WELL (I	30, Roswell, NM Report location clearly and	in accordance wi	th any St	ate requirem	ents.*)	<del>- · · · · · · · · · · · · · · · · · · ·</del>		wildca	
are marrace	660'FSL, SW/4SE/			•	,		11. SEC., T.,	R W OR I	0 F. W
At proposed prod. zo:		4. OUTCO					AND SU	BVEY OR AR	EA.
same							Sec.	17-8S	-37E
14. DISTANCE IN MILES	AND DIRECTION FROM NEA	REST TOWN OR POS	T OFFICE*				12. COUNTY	OR PARISH	113 87478
14 miles sout	heast of Milnes	and						evelt	NM
15. DISTANCE FROM PROP LOCATION TO NEARES	USED*		16. No.	OF ACRES IN	LEASE		T ACRES ASSI		IALI
PROPERTY OR LEASE : (Also to nearest dr)	LINE PT COO		120	0.0		TO TE	80.0		
18. DISTANCE FROM PROI	POSED LOCATION*		19. PROI	POSED DEPTH		20. ROTAL	RY OR CABLE "	TOOLS.	
OR APPLIED FOR, ON TH	ORILLING, COMPLETED, 13	320 1	+ 9	9620'			Rotary	20020	•
21. ELEVATIONS (Show wh	ether DF, RT, GR, etc.)	· · · · · · · · · · · · · · · · · · ·	<u>'                                    </u>			1	22. APPROX	K. DATE WO	BE WILL START*
4038 GL							1	15, 198	
23.		PROPOSED CASI	ING AND	CEMENTING	BROCE		1 June	±J• 190	30
9778 05 7075	1					-,			
SIZE OF HOLE	BIZE OF CASING	WEIGHT PER F	00T	SETTING I	DEPTH			Y OF CEMEN	
17_1/2"	13 3/8"	48#	_	3 <u>50</u>		300_S:	<u>x Class</u>	"C" Ci;	r. to top
12 1/4"	8 5/8"	2!#		4200		1	x Class_		11
7 7/8"	$5\frac{1}{2}$ " or $4\frac{1}{2}$ "	15.5# or :	11.6#	9 <i>5</i> 80'		400 S	x Class	"H"	
350' 4,200 7,500	- 350' Spud w - 4,200' Native - 7,500' Native - 9,620' Salt w	mud and by mud and by ater mud, V	rine rine /is. 3					l, No V	V/L contro
N ABOVE SPACE DESCRIBE one. If proposal is to deventer program, if any	PROPOSED PROGRAM: If p drill or deepen directional	lly, give pertinent	data on a	s back, give subsurface ld	cations a	nd measured	ctive zone an and true vert	d proposed	new productive
		TIT	LBY	100 110	WTGE!!	ν	DATE_	)- <u>(</u> -(	
(This space for Feder	al or State office use)								_
PERMIT NO			A D	PROVAL DATE					

## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

## OIL CONSERVATION DIVISION P. O. BOX 2088

Form C-102 Revised 10-1-78

SANTA FE, NEW MEXICO 87501

			All diete	nces must be f	rom the out	er hounderles c	f the Section			
Operator Ha	anson O	perating	Company	, Inc.	Lease	MKB FE	DERAL		Well No.	#1
Unit Letter	Section		Township 8 SC		Rang		County	ROOSEVE		
Actual Footage L	ocalion of	Well:	SOUTH			980				<del></del>
	<del></del>	rom the		line and		fr fr	et from the	EAST	line	
Ground Level Ele 403	1	Producing Fo			Pool			,	Dedicated Acress	
			ough C	•		Allison N		nn	80.0	Acres
2. If more interest	than one	e lense is alty).	dedicated	to the well	, outline	each and id	entify the	ownership t	ne plat below.	
dated by	Commun	itization, i	onitization	, force-pooli 'yes;' type o	ng. etc? [ consoli	dation			all owners bed	
this form No allow	nil neces able will	isnry.)   be assign	ed to the v	vell until all	interest	s have been	c onsolidat	ed (by com	munitizatión, v approved by th	nitization,
	i					!			CERTIFICATION	4
CEIVE	S 27 AM BB	SEC.17,	T.8 S.	R. 37 E.,	NMPM			tained he	certily that the Info rein Is true and coi y knowledge and be	mplete to the
LL.I	NAY CONTRACTOR SOND TO THE CONTRACTOR CONTRA		•					Company	ng & Product Operating Co	•
	1 1	•		NM-71	794			shown on notes of under my is true o	certify that the state plat was plats actual surveys made supervision, and the correct to the e and belief.	ed from field de by me or hat the some
				NM-562	277	1980'	<b>&gt;</b>	Date Sursey APRI	L-28, 1988 pro[620th] Engla	Se L.S.
0 330 660	00 137	0 1680 198	9 2910 26	40 2000	1500	1000	600	Centicale	6290	

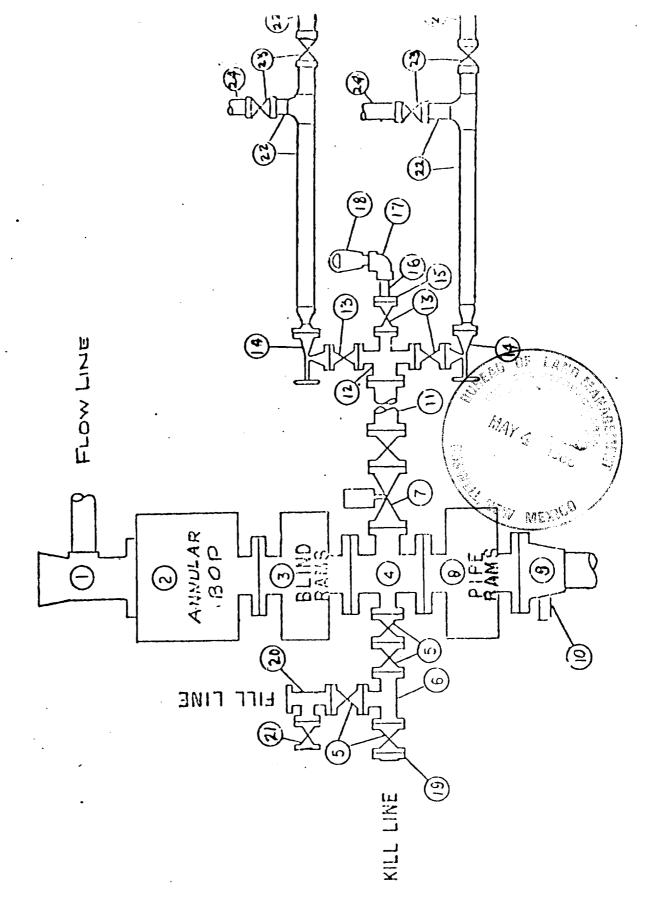


EXHIBIT "D"
RONADERO COMPANY, INC.
MKB FEDERAL #1

*J* ≥