

N. M. O. C. C. COPY  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

## 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.)

<p>1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry</p> <p>2. NAME OF OPERATOR HANAGAN PETROLEUM CORPORATION</p> <p>3. ADDRESS OF OPERATOR P. O. Box 1737, Roswell, New Mexico 88201</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2010' FNL &amp; 660' FEL</p> <p>14. PERMIT NO.</p> <p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3887 GR</p>	<p>5. LEASE DESIGNATION AND SERIAL NO. NM-029874</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME Link</p> <p>9. WELL NO. 1</p> <p>10. FIELD AND POOL, OR WILDCAT Wildcat</p> <p>11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 20-13S-30E</p> <p>12. COUNTY OR PARISH Chaves</p> <p>13. STATE N. M.</p>
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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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/> Temporarily Abandoned	

(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.)\*

10/11/74 - TD 2138 sand, hole dry at total depth. Temporarily abandoned well by filling hole with drilling mud and screwing cap on 8-5/8" casing, cmt. @ 507' (Top water zone @ 290'). No electric log run. Sample top Queen @ 1937', top Penrose @ 2025.

**RECEIVED**  
OCT 23 1974  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED W. L. Southerland TITLE Agent DATE 10/22/74

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL IF ANY:

TITLE APPROVED. WELL MUST  
BE PUT TO BENEFICIAL USE OR PLUGGED BY

DATE

UNLESS FURTHER  
BE PUT TO BENEFICIAL USE OR PLUGGED BY  
APR 1 - 1975

\*See Instructions on Reverse Side

**APPROVED**  
NOV 7 - 1974  
H. L. BEEKING  
ACTING DISTRICT ENGINEER