

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

API No. 30-025-29454

Form C-103
Revised 10-1-78

| | |
|------------------------|--|
| NO. OF COPIES RECEIVED | |
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G.S. | |
| LAND OFFICE | |
| OPERATOR | |

| | |
|---|------------------------------|
| 5a. Indicate Type of Lease | |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No. | |
| OG-2414 | |

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 Hamon Operating Company (915/682-5218) | | 8. Farm or Lease Name State OG-2414 | |
| 3. Address of Operator 611 Petroleum Building, Midland, Texas 79701 | | 9. Well No. 1 | |
| 4. Location of Well UNIT LETTER <u>E</u> , <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>7</u> TOWNSHIP <u>18S</u> RANGE <u>34E</u> NMPM. | | 10. Field and Pool, or Wildcat Undesignated Mescalero Escarpe Bone Spring | |
| 15. Elevation (Show whether DF, RT, GR, etc.) 4091' GR | | 12. County Lea | |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

| | | | |
|--|---|---|---|
| PERFORM REMEDIAL WORK <input 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 JOB <input type="checkbox"/> | OTHER <u>Change Operator Name</u> <input checked="" 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 1103.

To change name of Operator from Hamon Oil Company to Hamon Operating Company.

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

SIGNED B. W. Cozart (B. W. Cozart) TITLE Drilling Foreman DATE 10/17/85

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT 1 SUPERVISOR DATE OCT 21 1985
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
OCT 21 1985
O.C.D.
HOBBS OFFICE