

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on  
reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

N. M. 04452

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. <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME Mescalero Ridge	
2. NAME OF OPERATOR Ernest A. Hanson		8. FARM OR LEASE NAME Mescalero Ridge Unit #26	
3. ADDRESS OF OPERATOR P. O. Box 1515, Roswell, New Mexico		9. WELL NO. 4	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 330' FSL & 1980' FWL Sec. 26, T-19-S, R-34-E, N.M.P.M. Lea County, New Mexico		10. FIELD AND POOL, OR WILDCAT Pearl Queen	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 26 - 19S - 34E	
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 3739' KB		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:		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 checked="" 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 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.)\*

Jan. 24, 1967 Perf. 1 - 0.50" jet @ 4602', 4608', 4618', 4627', 4630', 4633', 4635', 4978', 4979', 4980', 4990', 4991' &amp; 4992'.

Jan. 25, 1967 Frac. perfs. 4978-4992' with 500 gals. acid + 20,000 gals. lease oil + 20,000 lbs. sand.

Frac. perfs. 4602- 4635' with 500 gals. acid + 20,000 gals. lease oil + 20,000 lbs. sand.

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

SIGNED

*Harry F. Schuman*

TITLE

Explor. Manager

DATE

2-1-67

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side