

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN ~~REPLICATE~~
(Other instr. is on re-
verse 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. L. C. 032604-A
2. NAME OF OPERATOR Hanson Oil Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1515, Roswell, New Mexico 88201		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310' FSL & 330' FWL Sec. 29, T-26-S, R-37-E, N.M.P.M. Lea County, New Mexico		8. FARM OR LEASE NAME CSA Federal
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 2939.6' GL	9. WELL NO. 1
		10. FIELD AND POOL, OR WILDCAT Scarborough - Yates
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 29 - 26S - 37E
		12. COUNTY OR PARISH Lea
		13. STATE N. Mex.

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 checked="" 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.)*

TD @ 3400' PBSD @ 3150' Perfs. @ 3019-3135' 8-5/8" @ 323' w/125 sx.
5-1/2" @ 3386' w/200 sx.

It is proposed to plug and abandon the captioned well in the following manner:

1. Displace hole with heavy mud.
2. Spot a 25 sx. cement plug @ 3019' across perfs.
3. Cut & recover as much 5-1/2" casing as possible.
4. Spot a 25 sx. cement plug in-and-out of 5-1/2" casing stub.
5. Spot a 25 sx. cement plug in-and-out of "Top of Salt" @ 1270'.
6. Spot a 25 sx. cement plug @ 223' in-and-out of 8-5/8" surface casing.
7. Spot a 10 sx. cement plug @ the surface & erect a regulation dry hole marker.
8. Clean up location for final U.S.G.S. inspection.

Verbal permission to plug given by USGS @ Hobbs.

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

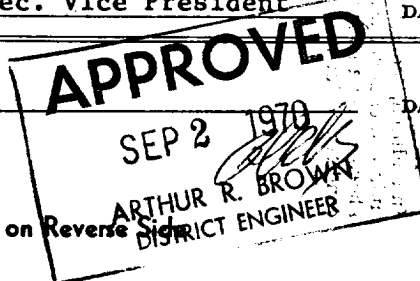
SIGNED Henry J. SchramTITLE Exec. Vice PresidentDATE 8-20-70

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____



*See Instructions on Reverse Side