

OCA - Hobbs

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT --" for such proposals

SUBMIT IN TRIPPLICATE

1. Type of Well: OIL WELL GAS WELL OTHER Water Injection Well.

2. Name of Operator Amerada Hess Corporation

3. Address and Telephone N P.O. Box 840, Seminole, TX 79360 915-758-6778

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter O : 660 Feet From The South Line and 1980 Feet From The
East Line Section 18 Township 019S Range 037E

5. Lease Designation and Serial No.
Federal LC-034075

6. If Indian, Alottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number
North Monument G/SA Unit Blk. 2

Well 15

9. API Well No.
30-025-05634

10. Field and Pool, Exploratory Area
Eunice Monument G/SA

11. County or Parish, State
Lea County, New Mexico

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input type="checkbox"/> OTHER: _____ <input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input checked="" type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. 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 verticle depths for all markers and zones pertinent to this

Please refer NMOCD Division Order No. R-9596-A

2-20 thru 3-2-2001

MIRU Key Energy Svc. pulling unit & TOH w/rods & pump. Removed wellhead, installed BOP & TOH w/tbg. TIH w/6-1/8" bit to 3916' & TOH. TIH w/RBP set at 3760'. Circ. csg. clean & press. tested csg. to 500 PSI for 30 min. Held OK. Spot 3 sks. sand on top RBP. Installed injection wellhead. TIH w/ret. tool, circ. sand off RBP, latched onto & TOH w/RBP. Cudd Acidizers acidized perms. fr. 3810' - 3863' & Open Hole fr. 3875' - 3916' w/2000 gal. 15% NEFE acid. Swabbed well. TIH w/7" 1XS pkr. on 2-3/8" Fiberglass lined tbg. & set pkr. at 3771'. Circ. pkr. fluid. Removed BOP & installed wellhead. Press. tested csg. to 540 PSI for 30 min. Chart attached. RDPU & cleaned location. Connected injection line & began injecting water 3-2-2001 at rate of 1239 B.W/D. on 1/64" choke. Csg. & Tbg. Press = 0 PSI. Well status changed from an oil well to a water injection well.

Rec'd Copy from 5-14-01

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

SIGNATURE Roy L. Wheeler, Jr. TITLE Bus. Svc. Spec. II DATE 03/05/2001
TYPE OR PRINT NAME Roy L. Wheeler, Jr.

(This space for Federal or State office use)
APPROVED BY Larry W. Wink TITLE _____ DATE _____
CONDITIONS OF APPROVAL IF ANY: _____

Title 18 U.S.C. Section 1001, makes it a crime for 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.

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