Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IP ANY:

State of New Mexico erals and Natural Resources Department Energy,

Form C-103

Revised 1-1-89

DISTRICT P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30-025-05732		
DISTRICT II					
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE X FEE		
			6. State Oil & G.		
SUNDRY NOT	ICES AND REPORTS ON WEL	18		1-6114 	77777
TO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name		
DIFFERENT HESEL	RVOIR. USE "APPLICATION FOR PEI -101) FOR SUCH PROPOSALS.)	RMIT	/. Lease Name o	r Unit Agreement Name	
1. Type of Well:	TOTI TON SOCH PROPOSALS.)		4		
OR GAS WELL OTHER INJECTION WELL			NORTH MONUMENT G/SA UNIT		
2. Name of Operator			BLK. 11		
AMERADA HESS CORPORATION			8. Well No.		
3. Address of Operator			9. Pool name or Wildcat		
POST OFFICE DRAWER D, MONUMENT, NEW MEXICO 88265			EUNICE MONUMENT G/SA		
	20 100711				
Unit Letter G : 196	80 Feet From The NORTH	Line and19	BO Feet From	m The EAST	Line
Section 29	Township 19S Ra	nge 37E		1 5 6	
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)	NMPM	LEA Co	unty
11. Check	Appropriate Box to Indicate 1	Nature of Notice, R	eport, or Othe	T Data	
NOTICE OF INT	FENTION TO:			REPORT OF:	
PERFORM REMEDIAL WORK			024021111	ILI ONI OF:	
	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING			OPNS.	PLUG AND ABANDONME	NT
PULL OR ALTER CASING CASING TEST AND CI					
OTHER:	<u> </u>			•	
		OTHER: ACIDIZE			_ X
 Describe Proposed or Completed Opera work) SEE RULE 1103. 	stions (Clearly state all pertinent details, an	d give pertinent dates, inclu	ding estimated date	of starting any proposed	
NMGSAU #1107 07-20	- -				
	cidized well w/1,500 Ga rt. PressVacuum. ISI erations on #1107.	l. 15% NEA DI w/ P-Vac.	'3% DP-77MX	and 1% DP-61.	
Thereby carrify that the information is 2.1					
I hereby certify that the information above is tru	e and complete to the best of my knowledge and				
SKINATURE SKY	J. Harvey m	Staff Ass	istant	DATE07-21-93	3
TYPE OR PRINT NAME	Terry L. Harvey			тецерноме но. 393-21	41
(This space for State Use)	Orig. Signed by Paul Kautz				
APPROVED BY	Geologist	1 			

AUG 03 1993

