

District I - (505) 393-6161
 1625 N. French Dr
 Hobbs, NM 88240
 District II - (505) 748-1283
 1301 W. Grand Avenue
 Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Road
 Aztec, NM 87410
 District IV - (505) 476-3440
 1220 S. St. Francis Dr.
 Santa Fe, NM 87505

New Mexico
 Energy Minerals and Natural Resources Department

Form C-139
 Revised 06/99

Oil Conservation Division
 1220 South St. Francis Dr.
 Santa Fe, New Mexico 87505
 (505) 476-3440

**SUBMIT ORIGINAL
 PLUS 2 COPIES
 TO APPROPRIATE
 DISTRICT OFFICE**

H-0874

APPLICATION FOR PRODUCTION RESTORATION PROJECT

I. Operator and Well:

Operator name & address Amerada Hess Corporation P. O. Drawer D, Monument, New Mexico 88265							OGRID Number 000495		
Contact Party Jay Baker							Phone 505 393-2144		
Property Name L. M. Lambert					Well Number 4		API Number 30-025-05928		
UL H	Section 6	Township 20S	Range 37E	Feet From The 1980	North/South Line North	Feet From The 660	East/West Line East	County Lea	

II. Pool and Production Restoration:

Previous Producing Pool(s) (If change in Pools):
Eunice Monument G/SA

Date Production Restoration started:
10-5-2001

Date Well Returned to Production:
2-18-2002

Describe the process used to return the well to production (Attach additional information if necessary):
Please refer attached copy C-103.

III. Identify the period and Division records which show the Well had thirty (30) days or less production for the twenty-four consecutive months prior to restoring production:

Records Showing Well produced less than 30 days during 24 month period: <input checked="" type="checkbox"/> Well file record showing that well was plugged data <input type="checkbox"/> ONGARD production data <input type="checkbox"/> OCD Form C-115 (Operator's Monthly Report)	Month/Year (Beginning of 24 month period): Month/Year (End of 24 month period): 02/18/2002
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IV. Affidavit:

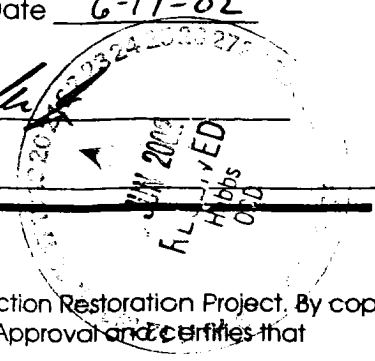
State of New Mexico)
) ss.
 County of Lea)
Jay Baker, being first duly sworn, upon oath states:

- I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
- I have personal knowledge of the facts contained in this Application.
- To the best of my knowledge, this application is complete and correct.

Signature Jay Baker Title Senior Production Foreman Date 6-17-02
 SUBSCRIBED AND SWORN TO before me this 17th day of June, 2002.

R. S. Wheeler
 Notary Public

My Commission expires: 3/15/05



FOR OIL CONSERVATION DIVISION USE ONLY:
 V. CERTIFICATION OF APPROVAL:
 This Application is hereby approved and the above-referenced well is designated a Production Restoration Project. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that production was restored on: 2/21/2002.

Signature District Supervisor <i>[Signature]</i>	OCD District <u>1</u>	Date <u>6/20/02</u>
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VI. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____

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