

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103

Revised August 1, 2011

WELL API NO. 30-021-20550
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> P <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name West Bravo Dome Unit
8. Well Number 261B
9. OGRID Number 495
10. Pool name or Wildcat West Bravo Dome CO2 Gas

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" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other X CO2	
2. Name of Operator Hess Corporation	
3. Address of Operator PO Box 840 Seminole TX 79360	
4. Well Location Unit Letter B : 315 feet from the N line and 1525 feet from the E line Section 26 Township 18N Range 29E NMPM County Harding	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5331 GR	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: INTENT TO FRAC plug & tbg & AS1 ☒

OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

WOS: Chase Frac plug to Bottom of rat hole & Run & set tbg. & AS1 packer
Day 1 MIRU Sundown PU & Pump Truck. Hold JSA to discuss work & safety concerns.
Kill well w/PW
ND WH & NU BOPs/stripper head/swivel
PU & RIH w/mill & WS.
Dry drill on frac plug & push to at least 2950'
TOOH w/ mill & WS standing back work string.
Flow to tank overnight
Day 2 Kill well with 8-16 bbls PW. ND Wellhead and NU BOP.
PU & RIH w/ AS1 packer (w/blanking plug) & WS
Set packer @ 2830 Feet. TOOH w/WS, laying down.
PU & RIH w/ FG tubing (2.875"). Circulate packer fluid. Latch onto packer.
Pressure casing to 500#. Bleed down casing. Pressure tubing to 500#. Bleed off tubing.
ND BOP's & NU WH.
MIRU WL service. RIH and pull blanking plug. RDMO wireline.
Pressure test backside to 500 psi for 30 min and chart for NMOCD.
RDMO PU. Clean location. Turn well over to production. * Note(s) 1. Hooking up to 5.5" Cameron Valve 2. AS-1 profile nipple 2.25"

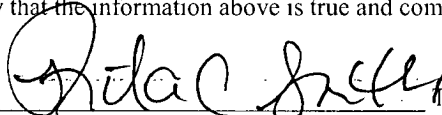
Spud Date:

05/07/2012

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE



TITLE Engineer Tech

DATE 06/13/2012

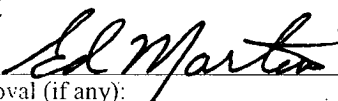
Type or print name Rita C Smith

E-mail address: rsmith@hess.com

PHONE: 432-758-6726

For State Use Only

APPROVED BY:



TITLE

DISTRICT SUPERVISOR

DATE 6/25/2012

Conditions of Approval (if any):

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PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
	CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: tag <input checked="" type="checkbox"/>

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1829 261B

6/6/2012 Wireline tagg fill/PBTD

Spud Date:

05/07/2012

Rig Release Date:

06/06/2012

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Rita C Smith

TITLE

Engineer Tech

DATE

06/11/2012

Type or print name Rita C Smith

E-mail address: rsmith@hess.com

PHONE: 432-758-6726

For State Use Only

APPROVED BY:

Ed Martin

TITLE

DISTRICT SUPERVISOR

DATE

6/25/2012

Conditions of Approval (if any):