Submit 3 Copies To Appropriate District State of	Ventucial Control	Form C-103
Office	and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 AUG 21	006	WELL API NO. 30-021-20127
1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERY	VATION DIVISION	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410  1000 Rio Brazos Rd., Aztec, NM 87410		STATE X FEE
District IV 1220 S. Startant		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505  Santa Fe, NM	87505	L-5827
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		7. Lease Name or Unit Agreement Name
		West Bravo Dome CDG Unit
PROPOSALS.)  1. Type of Well: Oil Well Gas Well Other CO2 Supply		8. Well Number 5
2. Name of Operator		9. OGRID Number
Hess Corporation		495
3. Address of Operator		10. Pool name or Wildcat
P.O. Box 840 Seminole, TX 79360		West Bravo Dome
4. Well Location  Unit Letter K · 1980 feet from the South line and 1980 feet from the West line		
J		
Section 31 Township 19N Range 30E NMPM County Harding  11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
4446'		
Pit or Below-grade Tank Application or Closure		
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water		
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING		
TEMPORARILY ABANDON 🔲 CHANGE PLANS	COMMENCE DR	<del>-</del>
PULL OR ALTER CASING	CASING/CEMEN	T JOB
OTHER:	OTHER: Casin	g Integrity Test [X]
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.		
or recompletion.		
8/7/2006		
Pressure tested casing to 560 psi for 30 min. Held OK. Chart attached. TA'd well.  Hess Corporation respectfully requests to continue TA'd status on well.		
Those composition responding requests to continue TAG status on well.		
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/ys be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.		
/ a · ( W) mass		" · •
SIGNATURE (MOL) / 100CC	TITLE Senior Advisor/Regu	DATE 8/22/2006
Type or print name Carol J. Moore	E-mail address: cmoore@he	ress.com Telephone No. (432)758-6738

APPROVED BY: Martin

Conditions of Approval (if any):

TITLE DISTRICT SUPERVISOR DATE 9-12-06



