

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs NM 88241-1980

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.	30-025-04054
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B-1431-3
7. Lease Name or Unit Agreement Name	NORTH MONUMENT G/SA UNIT BLK. 9
8. Well No.	11
9. Pool name or Wildcat	EUNICE MONUMENT G/SA

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 GAS WELL OTHER INJECTION WELL

2. Name of Operator
Amerada Hess Corporation

3. Address of Operator
P.O. DRAWER D, MONUMENT, NM 88265

4. Well Location
Unit Letter K : 1980 Feet From The SOUTH Line and 1980 Feet From The WEST Line
Section 25 Township 19S Range 36E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <u>CONVERT TO INJECTION WELL.</u> <input checked="" type="checkbox"/>		OTHER: _____ <input type="checkbox"/>	

12. 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.

NMGSAU #911
MIRU PU & REVERSE UNIT. ND WELLHEAD. TOH & LAY DWN. RODS & PUMP. NU BOP. TOH W/TBG. TIH W/RBP & SET @ +/-500'. INSTALL NEW WH EQUIP. TIH W/TBG. & RETRIEVE RBP. TOH W/RBP. RU WIRELINE CO. & STRING SHOOT O.H. W/400 GR/FT. TO RMV. BARIUM SCALE. RD WIRELINE. TIH W/BIT, D.C.'S & TBG. CLEAN OUT TO TD @ 4,000'. RU SCHLUMBERGER & LOG THE O.H. W/SONIC/CNL/GR/CCL TOOLS. RD SCHLUMBERGER. TIH W/BIT, D.C.'S & TBG. CLEAN OUT TO TD @ 4,000' & DRILL ABOUT 35' NEW HOLE TO 4,035'. TOH W/BIT. TIH W/SONIC HAMMER ON TBG. TO TD. RU ACID CO. ACIDIZE WELL W/5,000 GALS. 15% NEFE DI HCL W/1.5% DP-77MX MICELLAR SOLVENT. TOH W/SONIC HAMMER. TIH W/TBG. & PKR. SET PKR. @ +/-3,750'. SWAB/FLOW BACK LOAD. TOH W/TBG. & PKR. LAYING DWN. PROD. TBG. PU & TIH W/2-3/8" LINED INJ. TBG. W/INJ. PKR. ND BOP. NU INJ. WELLHEAD ASSEMBLY. RDMO PU. CLEAN & CLEAR LOCATION. OBTAIN SI BTM. HOLE PRESS. BEFORE BEGINNING INJECTION.

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

SIGNATURE Terry L. Harvey TITLE SR. STAFF ASSISTANT DATE 08/20/96
TYPE OR PRINT NAME TERRY L. HARVEY TELEPHONE NO. 505-393-2144

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE AUG 26 1996
CONDITIONS OF APPROVAL, IF ANY: