Submit 3 Copies To Appropriate District Office

Form C-103
Revised March 25, 1999

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
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

WELL API NO.
30-025-05871

5. Indicate Type of Lease
STATE ☐   FEE X

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name

J. W. Cooper "G"

1. Type of Well:
Oil Well X   Gas Well ☐   Other

8. Well No.
3

2. Name of Operator
Amerada Hess Corporation

9. Pool name or Wildcat
Monument Tubb

3. Address of Operator
P. O. Box 840,   Seminole, Texas 79360

4. Well Location

Unit Letter E : 1650 feet from the North line and 330 feet from the West line

Section 3   Township 20S   Range 37E   NMPM Lea County

10. Elevation (Show whether DR, 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 X	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING ☐	MULTIPLE COMPLETION	☐	CASING TEST AND CEMENT JOB	☐	
OTHER:		☐	OTHER:		☐

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Plan to MIRU pulling unit & TOH w/rods & pump. Remove wellhead, install BOP & TOH w/tbg. TIH w/RBP & pkr. Set RBP at +/- 6300' & press. test csg. If csg. leak determined, isolate csg. leak & cement squeeze. Drill out squeeze & press. test csg. Re-run prod. eqpt. & resume prod. well.
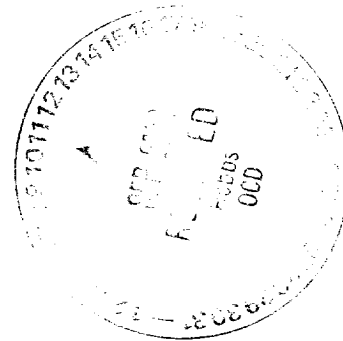
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE _____   TITLE Bus. Svc. Spec. II   DATE September 9, 2002

Type or print name   Roy L. Wheeler, Jr.   Telephone No. 915 758-6778

SEP 12 2002

(This space for State use)

ORIGINAL SIGNED BY

APPPROVED BY _____   TITLE GARY W. WINK   DATE _____

Conditions of approval, if any: OC FIELD REPRESENTATIVE II/STAFF MANAGER