

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

30-025-20517

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-1626
7. Unit Agreement Name
8. Farm or Lease Name State "V"
9. Well No. 5
10. Field and Pool, or Wildcat Monument-McKee
12. County Lea

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL, REDEVELOP OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. CIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Dry Hole
2. Name of Operator Amerada Hess Corporation
3. Address of Operator Drawer "D", Monument, New Mexico 88265
4. Location of Well UNIT LETTER G, 1980 FEET FROM THE North LINE AND 1830 FEET FROM THE East LINE, SECTION 36 TOWNSHIP 19S RANGE 36E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3603' DF

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 checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

McCullough Services set aluminum plug at 770'. Dumped 100' cement on top of plug. Top of cement at 670'. Setplug at 10' with 10' cement on top. Installed dry hole marker. Well P&A 11-6-74.

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

SIGNED M. B. [Signature] TITLE Supver., Admin. Services DATE 11-7-74

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

RECEIVED

1971 8 1074

**OIL CONSERVATION COMM.
HOBBS, N. M.**