

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

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

WELL API NO. 30-025-24082
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. A-1543-1
7. Lease Name or Unit Agreement Name North Monument G/SA Unit Blk. 3
8. Well No. 9
9. Pool name or Wildcat Grayburg - Water Supply Well

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 Water Supply Well.
2. Name of Operator Amerada Hess Corporation
3. Address of Operator Drawer D, Monument, New Mexico 88265
4. Well Location Unit Letter <u>I</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>East</u> Line Section <u>17</u> Township <u>19S</u> Range <u>37E</u> NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
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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"/>	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"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u>Initial WSW Operations.</u> <input checked="" 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.
3-1-95:
Began Water Supply Well operations pumping water at rate of 19,000 BWPD, 50# tbq. press.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE R. L. Wheeler, Jr. TITLE Admin. Svc. Coord. DATE 3-21-95
TYPE OR PRINT NAME R. L. Wheeler, Jr. TELEPHONE NO. 505 393-2144

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
APPROVED BY _____ TITLE _____ DATE MAR 27 1995
CONDITIONS OF APPROVAL, IF ANY:
2A-15-96 added 9/22/1