Office Submit I Copy To Appropriate District	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	October 13, 2009 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	OH CONCERNATION DRIVING	30-021-20442
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION	5. Indicate Type of Lease PRIVATE
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	Mitchell
1. Type of Well: Oil Well	Gas Well Other X CO2	8. Well Number 241K
2. Name of Operator Hess Corporation		9. OGRID Number 495
3. Address of Operator PO Box Semino	: 840 le TX 79360	10. Pool name or Wildcat West Bravo Dome CO2 Gas
4. Well Location		
Unit Letter K : 2310 feet from the SOUTH line and 2310 feet from the WEST line		
Section 24	Township 18N Range 29E	NMPM County HARDING
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5220'		
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 WO	RK
TEMPORARILY ABANDON DIVIDING TEMPORARILY ABANDON		RILLING OPNS. P AND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL CASING/CEMEI	NT JOB 📙
DOWN TOLL COMMUNICAL		
OTHER:	OTHER:	
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion.		
This APD is expired. Hess Corporation would like to cancel this APD.		
		·
Γ		
Spud Date:	Rig Release Date:	
Spud Date:	Rig Release Date:	
	Rig Release Date:	ge and belief.
I hereby certify that the information	above is true and complete to the best of my knowled	
I hereby certify that the information SIGNATURE	above is true and complete to the best of my knowled	DATE 4/19/2010
I hereby certify that the information SIGNATURE Type or print name Rita C. S	above is true and complete to the best of my knowled	DATE 4/19/2010
I hereby certify that the information SIGNATURE	above is true and complete to the best of my knowled THTLE Engineer Tech mith E-mail address: _rsmith@h	DATE 4/19/2010 LESS.COM PHONE: 432-758-6726
I hereby certify that the information SIGNATURE Type or print name Rita C. S	above is true and complete to the best of my knowled	DATE 4/19/2010 LESS.COM PHONE: 432-758-6726