Submit 1 Copy To Appropriate District Office	State of New			Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	October 13, 2009
District II	OIL CONCEDIATION DIVISION		30-021-20125	
1301 W. Grand Ave., Artesia, NM 88210 District III	till 1220 South St. Francis Dr. (201)		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		STATE X FEE 6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM		L-5817		
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name	
(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.)			WBDU	
1. Type of Well: Oil Well Gas Well Stother CO2 SUPPLY			8. Well Number 251K	
2. Name of Operator HESS Corporation			9. OGRID Number 495	
3. Address of Operator PO Box 840			10. Pool name or Wildcat (96387) West Bravo Dome CO2 Gas	
Seminole TX 79360 West Bravo Dome CO2 Gas 4. Well Location				
Unit Letter_ K : 1980 feet from the SOUTH line and 1980 feet from the WEST line				
Section 25	Township 19N	Range 29E		ounty HARDING
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4483 '				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF IN	TENTION TO:	SUB	SEQUENT REPOI	RT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORL		TERING CASING
TEMPORARILY ABANDON				
DOWNHOLE COMMINGLE		,		.*
OTHER:		OTHER:	SBHP Dip-ins	X _
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.				
MIRU Renegade WL services.				
RIH w/pressure guage to mid perf.				
TOOH w/ pressure guage.				
RDMO Renegade.				
Spud Date: 03/22/198	1 Rig Releas	e Date:		
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
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SIGNATURE XITAC	TITLE EI	NGINEERING TEC	CHDATE_	5/5/2011
Type or print name RITA C.	SMITH E-mail add	dress: rsmith@hes	s.com PHONI	E: 432-758-6726
For State Use Only BIOTRIAT CLIREDVICAD				
APPROVED BY: Conditions of Approval (if any):	Martin TITLE	isikili dupe	MVIJUN DATE	5/10/2011