State of New Mexico

Form C-103 Submit 3 copies to Appropriate District Office **Energy, Minerals and Natural Resources Department** Revised 1-1-89 **DISTRICT I OIL CONSERVATION DIVISION** WELL API NO. P.O. Box 1980, Hobbs, NM 88241 2040 Pacheco St. 30-021-20191 DISTRICT II Santa Fe, NM 87505 5. Indicate Type of Lease P.O. Box Drawer DD, Artesia, NM 88210 FEE 🔲 6. State Oil / Gas Lease No. Fed. NM-19714 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" West Bravo Dome CDG Unit (FORM C-101) FOR SUCH PROPOSALS.) OIL GAS 1. Type of Well WELL CO2 Supply Well. WELL **OTHER** 8. Well No. 2. Name of Operator 17 **Amerada Hess Corporation** 9. Pool Name or Wildcat West Bravo Dome 3. Address of Operator P.O. Box 840, Seminole, TX 79360 4. Well Location North Line and 2364 Feet From The __East__ 1784 _ Feet From The

Section 33	Township19N		Range 29E	NMPM	Harding COUNTY				
	10. Elevation (Show when	ther DF, R	KB, RT,GR, etc.) 539	95' GR	以前限等。少 榜				
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data									
NOTICE OF IN	TENTION TO:			SUBSEQUENT	REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK	AL	TERING CASING				
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLIN	G OPERATIONS 🔲 PL	UG AND ABANDONMENT				
PULL OR ALTER CASING			CASING TEST AND C	EMENT JOB					
OTHER:		🗆	OTHER:	TA'd W	/ell.				
10			datalla and sive nesti	nent detec including octi	mated data of				

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. 12.

8-7-2001

Press. tested csg. to 560 PSI for 30 min. Held OK. Chart attached. TA'd well.

Amerada Hess Corporation respectfully request a TA'd status on well.

AUTHORIZATION FOR MAINTENANCE IN SHUT-IN OK ie expince 8-7-06

	TEMPORARY ABANDONME	NY STATUS EXPIRES O	
I hereby certify that the information/above is the and calable to the best of my SIGNATURE	knowledge and belief. TITLE Bus. Svc. Spec. II	DATE08/15/2	2001
TYPE OR PRINT NAME ROYL. Wheeler, Jr.		TELEPHONE NO. 915-75	58-6778
(This space for State Use) APPROVED BY	— TITLE DISTRICT SUPERVISOR	R DATE 8/2	0/01
CONDITIONS OF APPROVAL, IF ANY://			DeSoto 2000 1.0

