

NO. OF COPIES RECEIVED	3
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
OPERATOR	1

NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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. OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> WELL <input type="checkbox"/> OTHER-	2. Name of Operator Amerada Hess Corporation	3. Address of Operator P. O. Drawer 817 - Seminole, Texas 79360	4. Location of Well UNIT LETTER <u>J</u> <u>1650</u> FEET FROM THE <u>South</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>17</u> TOWNSHIP <u>25N</u> RANGE <u>5W</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 6622' DF			12. County Rio Arriba

7. Unit Agreement Name
8. Farm or Lease Name Jicarilla Apache "F"
9. Well No. 1
10. Field and Pool, or Wildcat Blanco PC South Gas

16. 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 type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <u>Resume production of well</u> <input checked="" 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.

Well head valves opened and resumed production of well on 4-11-73.



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

SIGNED <u>ER C Arnold</u>	TITLE <u>Area Superintendent</u>	DATE <u>4-11-73</u>
APPROVED BY <u>Original Signed by Emery C. Arnold</u>	TITLE <u>SUPERVISOR DIST. #3</u>	DATE <u>APR 19 1973</u>

CONDITIONS OF APPROVAL, IF ANY: