Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103 Revised March 25, 1999	
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	
District II	OIL CONCEDIATION DIVISION		30-025-04130	
1301 W. Grand Ave., Artesia, NM 88210 District III			5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE X	
District IV	Santa Fe, NM 8/505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505				
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" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well:			J. R. Phillips Gas Com	
Oil Well Gas Well X Other				-
2. Name of Operator			7. Well No.	
Amerada Hess Corporation			1	
3. Address of Operator			8. Pool name o	
P. O. Box 840, Seminole, Texas 79360			Eumont	t Yates 7RQ
4. Well Location				
Unit LetterA :33	feet from the North	line and330	feet from the _	East line
Section 1	Township 20S	Range 36E		Lea County
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3586' KB				
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK X	PLUG AND ABANDON	REMEDIAL WORK	<	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	LLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB		
OTHER:		OTHER:		
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.				
Plan to MIRU pulling unit. Remove wellhead & install BOP. TIH w/5-7/8" bit to 3217' & TOH. TIH w/impression block &				
check for collapsed csg. TIH w/tapered mill and dress tight spot in csg. TIH w/bit to 3324', circ. clean. Continue prod. well.				
				214151672
			/>	12/3
			39707	180
			/ ග ආ	Q, \$00 Q, \$00 M,
				20 20
			ÇC1	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Of the Specialist - Field Admin. DATE April 10, 2003				
Type or print name Roy L. Wh			Telephone No. 9	
(This space for State use) OC FIELD REPRESENTATIVE II/STAFF MANAGER APR 1 5 2003				
APPPROVED BY Law U	D. Winke TITLE			_DATE
Conditions of approval, if any:				