| APPROVED BY: Conditions of Approval (if any): | Marte TITLE | MISIKICI S | UPERVISOR | DATE 6/25/2012 | |
|---|---|----------------------------|---------------------------------------|---|--|
| Type or print name Rita C Smith For State Use Only | | address: rsmith@ | | PHONE: 432-758-6726 | |
| I hereby certify that the information SIGNATURE | shift TITLE | The Control of the Control | ŕ | DATE06/11/2012 | |
| I hereby certify that the information | above is true and complete t | o the hest of my kn | owledge and belief | | |
| Spud Date: 05/02/2012 | Rig Rel | ease Date: | 05/17/2012 | | |
| 1 | | | | | |
| 5/17/12 Demobilize rig | _ | | ome to Seminole. | | |
| Nipple down BOP, instal | | • | wormboring, ur | | |
| from 2940' to 2960'. C: | | | | | |
| 5/16/12 PU and run 4-1 Tag soft cement at 294 | | | | | |
| | | | | and nipple up BOP, SDON. | |
| 5/15/12 Completion rig | and reverse unit mob | from Seminole | to West Bravo Do | me. | |
| 13. Describe proposed or comp | ork). SEE RULE 19.15.7.14 | ate all pertinent det | | t dates, including estimated date | |
| OTHER: | I | OTHER: | | X | |
| PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE | CHANGE PLANS [MULTIPLE COMPL [| | CE DRILLING OPNS. | ☐ ALTERING CASING ☐ ☐ P AND A ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ | |
| NOTICE OF IN | Appropriate Box to India | | SUBSEQUENT | REPORT OF: | |
| Company of the second | 5355 GR | | , , , , , , , , , , , , , , , , , , , | Louis 1 | |
| Section 14 | Township ^{18N} 11. Elevation (Show wheth | 1141150 | 1 11111 171 | County Harding | |
| Unit Letter N : | feet from the S | | | et from thelineline | |
| 4. Well Location | 220 | | | | |
| 3. Address of Operator PO Box 840 Seminole TX 79360 | | | | ne or Wildcat Dome CO2 Gas | |
| 2. Name of Operator Hess Co | 9. OGRID N | Jumber 495 | | | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other X CO2 | | | | nber 142N | |
| SUNDRY NOT (DO NOT USE THIS FORM FOR PROPO | A ' | me or Unit Agreement Name | | | |
| <u>District IV</u> - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 | Santa Fe, 1 | NIVI O/JUJ | 6. State Oil | & Gas Lease No. | |
| <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South S | • | STAT | E FEE P | |
| District II (575) 748-1283 811 S. First St., Artesia, NM 88210 | OIL CONSERVA | TION DIVISIO | N . | 5. Indicate Type of Lease | |
| District I ~ (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals and | d Natural Resource | well API i | Revised August 1, 2011 NO. | |
| Office Office | State of Ne | | • | Form C-103 | |

| Submit 1 Copy To Appropriate District Office | State of New Mexico | Form C-103 | |
|--|--|--|--|
| District I - (575) 393-6161 | Energy, Minerals and Natural Resources | Revised August 1, 2011 WELL API NO. | |
| 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 | OH CONGERVATION DIVISION | WELL API NO. 30-021-20553 | |
| 811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 | OIL CONSERVATION DIVISION 1220 South St. Francis Dr. | 5. Indicate Type of Lease | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | Santa Fe, NM 87505 | STATE FEE 6. State Oil & Gas Lease No. | |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM | 5unu 1 0, 1111 0, 5 05 | 0. State Off & Gas Lease No. | |
| 87505 SUNDRY NO | TICES AND REPORTS ON WELLS | 7. Lease Name or Unit Agreement Name | |
| (DO NOT USE THIS FORM FOR PROP | OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A LICATION FOR PERMIT" (FORM C-101) FOR SUCH | West Bravo Dome Unit | |
| PROPOSALS.) 1. Type of Well: Oil Well | 8. Well Number 142N | | |
| 2. Name of Operator Hess | 9. OGRID Number | | |
| 3. Address of Operator PO Box | | 10. Pool name or Wildcat | |
| 3. Address of Operator po Box | West Bravo Dome CO2 Gas | | |
| 4. Well Location | | 2C20 W | |
| Unit Letter N Section 14 | : 330 feet from the S line and Township 18N Range 29E | | |
| Section 14 | Township 18N Range 29E 11. Elevation (Show whether DR, RKB, RT, GR, | Nivii ivi County | |
| | 5355 GR | The state of the s | |
| | | | |
| 12. Check | Appropriate Box to Indicate Nature of Noti | ce, Report or Other Data | |
| | · · · · · · · · · · · · · · · · · · · | UBSEQUENT REPORT OF: | |
| PERFORM REMEDIAL WORK | - | <u> </u> | |
| TEMPORARILY ABANDON [PULL OR ALTER CASING [| <u> </u> | DRILLING OPNS.☐ P AND A ☐ #FNT.IOB ☐ | |
| DOWNHOLE COMMINGLE | - | | |
| OTHER: | ☐ OTHER: | tag - clean out fill | |
| | repleted operations. (Clearly state all pertinent details | | |
| or starting any proposed v | work). SEE RULE 19.15.7.14 NMAC. For Multiple ecompletion. | Completions: Attach wellbore diagram of | |
| 1829 14 2N | | • | |
| 6/6/2012 Wireline tag | gg fill/PBTD | | |
| | , | | |
| 6/8/2012 Utilize CTU | to clean fill to PBTD | | |
| | | | |
| | | | |
| | | | |
| | • | | |
| | | | |
| Spud Date: 05/02/2012 | Rig Release Date: | 06/08/2012 | |
| | | | |
| I haraby cartify that the information | n above is true and complete to the best of my know | ladge and halief | |
| i nereby certify that the informatio | n above is true and complete to the best of my know | leage and benefi. | |
| 31311 TUDE (1/1/ | TITLE Engineer Tech | DATE 06/11/2012 | |
| SIGNATURE TAGE | CAIN! TITLE | DATE 06/11/2012 | |
| Type or print name Rita C Smit | | | |
| | E-mail address: rsmith@he | ss.com PHONE: 432-758-6726 | |
| For State Use Only | | | |
| | E-mail address: rsmith@he | | |

| Office | ite of New Mexic | | | Form C-103 | |
|--|--|---|---------------------|-----------------------------------|--|
| District I - (575) 393-6161 Energy, Min | nerals and Natural | Resources | | Revised August 1, 2011 | |
| 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. |)-021-20553 | |
| District II - (575) 748-1283 811 S. First St. Artesia, NM 88210 OIL CON | | | | | |
| 011 5.1 H5t 5t., 7 Mtc5ld, 1414 00210 | 50., 7 Hesia, 144 60210 | | | of Lease | |
| 00 Rio Brazos Rd., Aztec, NM 87410 | | | STATE [| FEE _ f | |
| <u> </u> | ilia re, ivivi 6730 | 13 | 6. State Oil & Ga | s Lease No. | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | _ | |
| SUNDRY NOTICES AND REPOR | RTS ON WELLS | | 7. Lease Name or | Unit Agreement Name | |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR T | | | West Bravo Do | anna Tīmā b | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT | " (FORM C-101) FOR S | UCH | west Bravo Do | ome onic | |
| PROPOSALS.) 1. Type of Well: Oil Well Gas Well Otl | her X CO2 | | 8. Well Number 142N | | |
| 2. Name of Operator | nor coz | | 9. OGRID Numb | or | |
| Hess Corporation | | | 9. OGRID Numb | 495 | |
| 3. Address of Operator PO Box 840 Seminole | 10. Pool name or Wildcat | | | | |
| 3. Address of Operator PO Box 840 Seminole | West Bravo Dome CO2 Gas | | | | |
| 4 Wall Leastion | | | | | |
| 4. Well Location Linit Letter N 330 feet from | S | 1. 1 26 | 520 6 . 6 | . W | |
| Offit Letterfeet fro | m the S | line and | | | |
| | hip ^{18N} Range | | NMPM | County Harding | |
| | how whether DR, RK | KB, RT, GR, etc., | | | |
| 53 5 | 55 GR | | | | |
| | : | | | | |
| 12. Check Appropriate Box | to Indicate Natu | re of Notice, | Report or Other | Data | |
| | 1 | | | | |
| NOTICE OF INTENTION TO | | | SEQUENT RE | | |
| PERFORM REMEDIAL WORK PLUG AND ABA | | EMEDIAL WOR | | ALTERING CASING | |
| TEMPORARILY ABANDON | | | LLING OPNS. | P AND A | |
| PULL OR ALTER CASING MULTIPLE COM | IPL 🗌 C | ASING/CEMEN | T JOB 🔲 | | |
| DOWNHOLE COMMINGLE | | *. | | | |
| tbg & AS1 | | | | — | |
| OTHER: | | THER: | | | |
| 13. Describe proposed or completed operations. (| | | | | |
| of starting any proposed work). SEE RULE 1 | 9.15.7.14 NMAC. 1 | or Multiple Col | mpietions: Attach v | elibore diagram of | |
| proposed completion or recompletion. WOS: Run & set tbg. & AS1 packer | | | | | |
| ioo. Kair a bee ebg. a Abr packer | | | • | | |
| Notify Ed Martin at NMOCD prior to rig-up. | | | * | | |
| Notify Ed Martin at NMOCD prior to rig-up. Kill well with 8-16 bbls PW. ND Wellhead and NU BOP. | | | • | | |
| | · | | | | |
| Kill well with 8-16 bbls PW. ND Wellhead and NU BOP. | | | | | |
| Kill well with 8-16 bbls PW. ND Wellhead and NU BOP. PU & RIH w/ AS1 packer (w/blanking plug) & WS | . Latch onto packer. | | | | |
| Kill well with 8-16 bbls PW. ND Wellhead and NU BOP. PU & RIH w/ AS1 packer (w/blanking plug) & WS Set packer @ 2840 Feet. TOOH w/WS, laying down. | _ | . off tubing. | | | |
| Kill well with 8-16 bbls PW. ND Wellhead and NU BOP. PU & RIH w/ AS1 packer (w/blanking plug) & WS Set packer @ 2840 Feet. TOOH w/WS, laying down. PU & RIH w/ FG tubing (2.875"). Circulate packer fluid Pressure casing to 500#. Bleed down casing. Pressure ND BOP'S & NU WH. | tubing to 500#. Bleed | I off tubing. | | | |
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Conditions of Approval (if any):