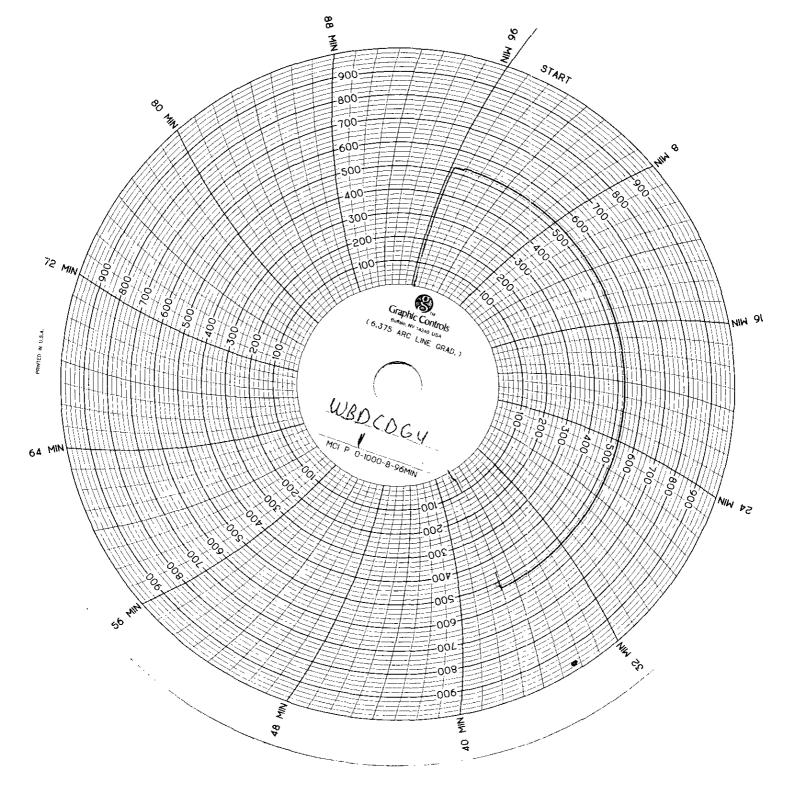
Submit 3 Copies To Appropriate District Office	State of Diew Mexico	Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240 >	ergy, Milierals and Nataral Resquires	WELL API NO.
District II		30-021-20032
District III 1301 W. Grand Ave., Artesia, NM 88210 1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410		STATE X FEE 6. State Oil & Gas Lease No.
Sundry Notices and Reports on Wells 5. St. Francis Drive Sundry Notices and Reports on Wells 5. The Sundry Notices and Reports 5. The Sundry Notices 6. The Sundry Notic		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		West Bravo Dome CDG Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other CO2 Supply		8. Well Number 01
2. Name of Operator		9. OGRID Number
Hess Corporation		495
3. Address of Operator		10. Pool name or Wildcat
P.O. Box 840 Seminole, TX 79360 West Bravo Dome 4. Well Location		
Unit Letter N : 660 feet from the South line and 1980 feet from the West line		
Section 11	Township 19N Range 29E	NMPM County Harding
	evation (Show whether DR, RKB, RT, GR, etc.	
	4566'	
Pit or Below-grade Tank Application or Closure		
Pit typeDepth to Groundwater		
		onstruction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
	AND ABANDON REMEDIAL WOF	
	=	RILLING OPNS. P AND A
PULL OR ALTER CASING MULTI	PLE COMPL	IT JOB []
OTHER:	OTHER: Casin	ng Integrity Test
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.		
8/8/2006		
Pressure tested casing to 525 psi for 30 min. Held OK. Chart attached. TA'd well. Hess Corporation respectfully requests to continue TA'd status on well.		
1 1000 Comportation respectively requests to continue 1 A d status on well.		
I hereby certify that the information above is grade tank has been/will be constructed or closed according to the constructed or closed	true and complete to the best of my knowledged to NMOCD guidelines ☐, a general permit ☐	ge and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan
SIGNATURE W	TITLE Senior Advisor/Reg	ulatory DATE 8/22/2006
Type or print name Carol J. Moore For State Use Only	E-mail address: cmoore@h	ess.com Telephone No. (432)758-6738
APPROVED BY: Max Conditions of Approval (if any):	<u></u>	JPERVISOR DATE 9-12-06



COMMINE HESS WELL WAS DEED TO STORE STORE