

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505  
Oil Conservation Division  
1220 S. St. Francis Drive  
Santa Fe, NM 87505

WELL API NO. 30-021-20124
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. L-5811
7. Lease Name or Unit Agreement Name West Bravo Dome CDG Unit
8. Well Number 7
9. OGRID Number 495
10. Pool name or Wildcat West Bravo Dome

**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. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other CO2 Supply <input type="checkbox"/>
2. Name of Operator Hess Corporation
3. Address of Operator P.O. Box 840 Seminole, TX 79360
4. Well Location Unit Letter H : 1650 feet from the North line and 900 feet from the East line Section 16 Township 19N Range 29E NMPM County Harding

11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4685'
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Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

**12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data**

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Casing Integrity Test <input checked="" type="checkbox"/>
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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.

8/7/2006

Could not test well due to weather related inaccessibility.  
NMOCD representative Ed Martin was present and gave verbal approval to address when Hess begins the WDBU drilling program in April 2007.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Carol J. Moore TITLE Senior Advisor/Regulatory DATE 8/22/2006

Type or print name Carol J. Moore E-mail address: cmoore@hess.com Telephone No. (432)758-6738  
**For State Use Only**

APPROVED BY: Ed Martin TITLE **DISTRICT SUPERVISOR** DATE 9-12-06  
Conditions of Approval (if any):