

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-021-20436
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other CO2		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Hess Corporation		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 840 Seminole, TX 79360		7. Lease Name or Unit Agreement Name West Bravo Dome Unit
4. Well Location Unit Letter G : 2100 feet from the North line and 2100 feet from the East line Section 32 Township 19N Range 29E NMPM County Harding		8. Well Number 321
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5444' GL		9. OGRID Number 495
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type Lined Depth to Groundwater 1050' Distance from nearest fresh water well >1000 Distance from nearest surface water >1000'		
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume 850 bbls; Construction Material Synthetic		

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: Pit closure extension <input checked="" 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: <input 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.

Request extension for pit closure to allow evaporation of water.

EXTENSION UNTIL 8/25/08 APPROVED.

RECEIVED  
2008 MAR 6 PM 2 03

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 Moore TITLE Regulatory Analyst DATE 3/4/2008

Type or print name Carol Moore

E-mail address: cmoore@hess.com

Telephone No. (432)758-6738

For State Use Only

APPROVED BY: Ed Martin TITLE DISTRICT SUPERVISOR DATE 3/7/08

Conditions of Approval (if any):