

State of New Mexico
Energy, Minerals and Natural ResourcesOIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-021-20439
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Mitchell
8. Well Number 101J
9. OGRID Number 495
10. Pool name or Wildcat West Bravo Dome CO2 Gas
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5405 GL

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 ☐ Gas Well ☒ Other X CO2 GAS WELL

2. Name of Operator Hess Corporation

3. Address of Operator PO Box 840
Seminole TX 793604. Well Location
Unit Letter J : 2150 feet from the SOUTH line and 1800 feet from the EAST line
Section 10 Township 18N Range 29E NMPM County HARDING11. Elevation (Show whether DR, RKB, RT, GR, etc.)
5405 GL

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
 DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ P AND A ☐
 CASING/CEMENT JOB ☐

OTHER: ☐OTHER: Request Approval ☒

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Requesting approval for the tubingless completion.

This well has fiberglass casing from surface to the productive interval (TUBB).

Steel casing will be used across the TUBB.

The fiberglass casing must penetrate the Cimarron at a minimum.

The optimum point for the setting the fiberglass casing

is at the midpoint of the Cimarron formation.

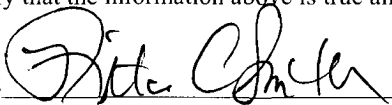
Spud Date:

07/21/2007

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE



TITLE ENGINEERING TECH

DATE 1/8/2010

Type or print name Rita C. Smith

E-mail address: rsmith@hess.com

PHONE: 432-758-6726

For State Use Only

APPROVED BY:



TITLE

DISTRICT SUPERVISOR

DATE 1/21/10

Conditions of Approval (if any):