Office	State of New Mexico	Form C-103
District I Ener	gy, Minerals and Natural Resources	October 13, 2009
1625 N. French Dr., Hobbs, NM 88240 District II	CONGERNAL TION DUNGLON	WELL API NO. 30-021-20413
1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION		5. Indicate Type of Lease X Federal
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410		STATE FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505		NMNM-63272
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(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		West Bravo Dome Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other CO2 Supply		8. Well Number 111F
2. Name of Operator Hess Corporation		9. OGRID Number 495
3. Address of Operator PO Box 840		10. Pool name or Wildcat (96387)
Seminole TX 79360		West Bravo Dome CO2 Gas
4. Well Location		
Unit Letter F: 1720 feet from the NORTH line and 1950 feet from the WEST line		
Section 11	Township 18N Range 29E	NMPM County HARDING
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5328'		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTIO	N TO: SUB	SEQUENT REPORT OF:
	ND ABANDON REMEDIAL WOR	
		ILLING OPNS. P AND A
	LE COMPL	T JOB
DOWNHOLE COMMINGLE		
OTHER:	□ OTHER:	Swab unit
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.		
proposed completion of recompletion.		
1829 111F		
MI x RU swab unit, swab down casing to 2150 FFS,		
14 runs, recovered 33 bbls of load water,		
RD x MO Swab unit.		
ND A MO BWAD MITE.		
		
Spud Date: 5/22/10	Rig Release Date:	2010
3/22/10		2010
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
$\Delta l = 0.00$		
SIGNATURE THAT SMITH	TITLE Engineering Te	ch DATE 6/23/2010
Type or print name Rita C. Smith	E-mail address: _rsmith@hes	s.com PHONE: 432-758-6726
For State Use Only		_
DISTRICT SUBEDVICOR		
ADDDOVED DV. A AS VVIA - ~	DISTRICT SUPF	RVISOR DIE LIZZ
APPROVED BY: Conditions of Approval (if any):	DISTRICT SUPE	RVISOR DATE 6/7/10