Office Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	October 13, 2009 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	OH CONCERNATION DIVIGION	30-021-20504
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE K
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Pe, Nivi 87505	6. State Oil & Gas Lease No.
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 PROPOSALS.)		Mitchell
1. Type of Well: Oil Well Gas Well Y Other CO2 SUPPLY		8. Well Number 191J
2. Name of Operator HESS Corporation		9. OGRID Number 495
3. Address of Operator PO Box 840 Seminole TX 79360		10. Pool name or Wildcat (96387) West Bravo Dome CO2 Gas
4. Well Location		
	980 feet from the SOUTH line and	1650feet from theEASTline
Section 19	Township 19N Range 30E	NMPM County HARDING
10.19.10.10.10.10.10.10.10.10.10.10.10.10.10.	11. Elevation (Show whether DR, RKB, RT, GR, etc. 4460'	
12 Charle A	nnranriata Pay ta Indianta Natura of Natica	Domant on Other Data
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK ☐ TEMPORARILY ABANDON ☐	PLUG AND ABANDON REMEDIAL WOLCHANGE PLANS COMMENCE DE	RK ☐ ALTERING CASING ☐ ☐ RILLING OPNS.☐ P AND A ☐
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	_
DOWNHOLE COMMINGLE	G/6/10/02/W2/	
OTHER. Acid Stimula	ation 🔽 otus	
OTHER: OTHER: OTHER: OTHER:		
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion.		
- MIRU Schlumberger W/L Services		
- acid stimulation job on well		
- RDMO Schlumberger W/L		
- returned to production		
2000000 00 P2		
Spud Date: 4/19/2010	Rig Release Date:	
1, 13, 2010		J
I hereby certify that the information a	bove is true and complete to the best of my knowled	ge and belief.
(H) L. O		
SIGNATURE SIGNATURE SIGNATURE TECH		DATE 6/29/2010
Type or print name RITA C. SMITH E-mail address: rsmith@hess.com PHONE:432-758-6726		
Type or print name RITA C. S For State Use Only	E-mail address: Ebilitelle	PHONE: 132 /30 0/20
	M L' DICTRICT CLIB	ERVISOR DATE 7/7/18
APPROVED BY: Conditions of Approval (if any):	Martin TITLE UISTRICT SUP	LNAIDUK DATE 7/7/10
A A - (J).	5	