

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
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

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-021-05071
1. Type of Well: Oil Well ☐ Gas Well ☐ Other CO2 Supply Well.		5. Indicate Type of Lease STATE ☐ FEE ☒
2. Name of Operator Amerada Hess Corporation		6. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 840, Seminole, Texas 79360-0840		7. Lease Name or Unit Agreement Name: Mitchell
4. Well Location Unit Letter M : 660 feet from the South line and 660 feet from the West line Section 8 Township 19N Range 30E NMPM County Lea		8. Well No. 6
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4547' GL		9. Pool name or Wildcat Mitchell-Abo

11. 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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: **Press. Tested & TA'd Well.** ☒

12. 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 recompilation.

01-30-2002

Press. tested csg. to 580 PSI for 30 min. Held OK. Chart attached. Cleaned location & TA'd well.

Amerada Hess Corporation respectfully request a TA'd status on well to evaluate for future work.

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

SIGNATURE Roy L. Wheeler, Jr. TITLE Bus. Svc. Spec. II DATE 02-04-2002

Type or print name Roy L. Wheeler, Jr. Telephone No. 915 768-6778

(This space for State use)

APPROVED BY Roy L. Wheeler, Jr. TITLE DISTRICT SUPERVISOR DATE 2/8/02
Conditions of approval, if any:

