

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
OPERATOR	4

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Helium Gas Well - SI		7. Unit Agreement Name
2. Name of Operator Amerada Hess Corporation		8. Farm or Lease Name Navajo Tract 4
3. Address of Operator P.O. Drawer 817 - Seminole, Texas 79360		9. Well No. 1
4. Location of Well UNIT LETTER C 660 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 20 TOWNSHIP 27N RANGE 17W N.M.P.M.		10. Field and Pool, or Wildcat S. Table Mesa-Paradox
15. Elevation (Show whether DF, RT, GR, etc.) 5311 GR.		12. County San Juan

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

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"/>	OTHER Test <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

This well completed in Paradox Zone from 7080' to 7104'. Currently flowing into Test Tank.

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

SIGNED <u>H. O. Porter</u>	TITLE <u>Supv. Admin. Services</u>	DATE <u>10/31/74</u>
APPROVED BY <u>Gregory C. Cawel</u>	TITLE <u>SUPERVISOR DIST. #3</u>	DATE <u>11-6-74</u>
CONDITIONS OF APPROVAL, IF ANY:		