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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  Fee

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator <b>Amerada Division, Amerada Hess Corporation</b>	8. Farm or Lease Name <b>J. R. Phillips</b>
3. Address of Operator <b>P. O. Box 1920 - Hobbs, New Mexico</b>	9. Well No. <b>8</b>
4. Location of Well UNIT LETTER <b>G</b> <b>2088.5</b> FEET FROM THE <b>north</b> LINE AND <b>1980'</b> FEET FROM THE <b>east</b> LINE, SECTION <b>1</b> TOWNSHIP <b>20-S</b> RANGE <b>36-E</b> N.M.P.M.	10. Field and Pool, or Wildcat <b>Monument Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3582' DF</b>	12. County <b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <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.

**Acidized perfs. 3682' to 3724' with 2000 gals. 15% NE acid with 120# wide range unibeads as diverter. Reran production equipment and resumed production 12-8-69. No change in production status.**

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

SIGNED *Go Debb* TITLE **District Superintendent** DATE **December 9, 1969**

APPROVED BY *Leslie A. Clements* TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: