

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-101
August 1, 2011
Permit 140477

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

1. Operator Name and Address HESS CORPORATION P.O. Box 840 Seminole, TX 79360		2. OGRID Number 495
		3. API Number 30-021-20554
4. Property Code 16752	5. Property Name WEST BRAVO DOME UNIT	6. Well No. 211

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
D	21	19N	29E	D	990	N	990	W	HARDING

8. Pool Information

WEST BRAVO DOME CO2 GAS	96387
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Additional Well Information

9. Work Type New Well	10. Well Type CO2	11. Cable/Rotary	12. Lease Type Private	13. Ground Level Elevation 5418
14. Multiple N	15. Proposed Depth 2934	16. Formation Granite Wash	17. Contractor	18. Spud Date
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

19. Proposed Casing and Cement Program

Type	Hole Size	Casing Type	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	12.25	8.625	24	1600	550	0
Prod	7.875	5.5	15.5	2950	360	0

Casing/Cement Program: Additional Comments

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Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
DoubleRam	2000	2000	Shaffer

I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify that the drilling pit will be constructed according to NMOCD guidelines ☐ , a general permit ☐ , or an (attached) alternative OCD-approved plan ☐ . Printed Name: Electronically filed by Rita Smith Title: Engineering Tech Email Address: rsmith@hess.com Date: 11/18/2011 Phone: 432-758-6726	OIL CONSERVATION DIVISION	
	Approved By: Ed Martin	
	Title: District Supervisor	
	Approved Date: 1/9/2012	Expiration Date: 1/9/2014

DISTRICT I
1885 N. French Dr., Hobbs, NM 88240

DISTRICT II
1801 W. Grand Avenue, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT IV
1880 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised July 18, 2010
Submit one copy to appropriate
District Office

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number	Pool Code 96387	Pool Name West Bravo Dome CO2 Gas
Property Code 16752	Property Name West Bravo Dome Unit WDDCU 1929	Well Number 211D
UGRID No. 495	Operator Name HESS CORPORATION	Elevation 5418'

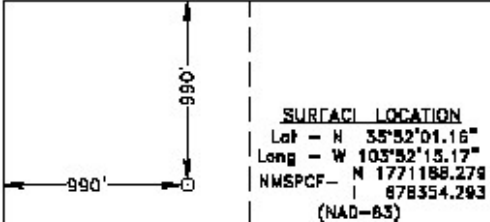
Surface Location

UL or lot No. D	Section 21	Township 19 N	Range 29 E	Lot Idn D	Feet from the 990	North/South line NORTH	Feet from the 990	East/West line WEST	County HARDING
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Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 640	Joint or Infill	Consolidation Code U	Order No.						

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. Rita C. Smith Signature _____ Date _____ Rita C. Smith Printed Name _____ rsmith@hess.com Email Address _____ SURVEYOR CERTIFICATION I hereby verify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. Date Surveyed _____ Signature & Seal of Professional Surveyor _____ Certificate No. Gary L. Jones 7977 BASIN SURVEYS 24622
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