Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-021-20142	
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410		Or.	5. Indicate Type of Lease STATE FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM Santa Fe, NM 87505			6. State Oil & Gas Lease No	o. ·
87505			L-5852	
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.)			7. Lease Name or Unit Agreement Name West Bravo Dome Unit (WBDU)	
1. Type of Well: Oil Well Gas Well Tother CO2 SUPPLY		8. Well Number 211F		
2. Name of Operator HESS Corporation		9. OGRID Number 3495		
3. Address of Operator PO Box 840 Seminole TX 79360			10. Pool name or Wildcat West Bravo Dome	(96387) - <u>CO</u> 2 Gas
4. Well Location Unit Letter F 1980 feet from the NORTH line and 1980 feet from the WEST line				
Unit Letter F : 1980 feet from the NORTH line and 1980 feet from the WEST line Section 21 Township 18N Range 29E NMPM County HARDING				
Section 22	11. Elevation (Show whether DR, RKB,		TOTAL COUNTY	2-12-00 I
5435'				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF IN	NTENTION TO:	SUBS	SEQUENT REPORT C)F:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ARANDON REMEDIAL WORK RANDA RAN				
TEMPORARILY ABANDON				
DOWNHOLE COMMINGLE				
OTHER: OTHER: YEARLY BRADENHEAD TEST(SI)				
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date				
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
WBDU 1829-211F Annual Bradenhead Test	(ST Well)			
Year Date Tbg P	SI Csg PSI Bleed Down Time	1		
2010 1/25/10 550 2011 2/21/11 515	0			
2012 4/10/12 555	0			
This approval for temporary abandonment				
2014 <i>;</i> 2015		res 8/3		
2016	expi	res	THE RESERVE AND AND AND ADDRESS OF THE PARTY	
2017 2018	•	*		
2019			•	
2020				•
Spud Date:	Rig Release Date:			
				·
I hereby certify that the information	above is true and complete to the best of	my knowledge	and belief.	
(ACT)	` X \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			/
SIGNATURE VV	TITLE ENGINEE	RING TEC	H DATE 4/	10/2012
Type or print name RITA C. For State Use Only	SMITH E-mail address: rst	mith@hes	F. COM PHONE: 432	2 - 758-6726.
10.	Marker TITLE DISTRIC	TSIPER	VISOR	· / /
APPROVED BY: Conditions of Approval (if any):	Markon TITLE BIVIIII	I AAI PI	DATE 4/	20/20/2