

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
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 August 1, 2011

|   |
|---|
| WELL API NO.<br>30-021-20414  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br>West Bravo Dome Unit  |
| 8. Well Number 341G   |
| 9. OGRID Number 495   |
| 10. Pool name or Wildcat<br>West Bravo Dome CO2 Gas   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>4639 GR                                       |

|  |  |
|--|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other X CO2   |  |
| 2. Name of Operator<br>Hess Corporation  |  |
| 3. Address of Operator PO Box 840 Seminole TX 79360  |  |
| 4. Well Location<br>Unit Letter G : 2420 feet from the N line and 1650 feet from the E line<br>Section 34 Township 19N Range 29E NMPM County Harding   |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>4639 GR  |  |

12. 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 type="checkbox"/>           | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>  | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>       |  |
| DOWNHOLE COMMINGLE <input type="checkbox"/>    |   |  |  |
| OTHER: <input type="checkbox"/>                |   | OTHER: CTU <input checked="" type="checkbox"/>   |  |

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.

1929 341G

05/01/2012

Utilize Coil Tubing Unit to blow down well to prepare for perforation

Blow Down 38bbbls of KCL

Spud Date:

11/15/2011

Rig Release Date:

5/1/2012

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

SIGNATURE

*Rita C Smith*

TITLE

Engineer Tech

DATE

05/22/2012

Type or print name Rita C Smith

E-mail address: rsmith@hess.com

PHONE: 432-758-6726

For State Use Only

APPROVED BY:

*Ed Martin*

TITLE

DISTRICT SUPERVISOR

DATE

5/30/2012

Conditions of Approval (if any):