

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

Form C-103  
Revised August 1, 2011

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

WELL API NO. 30-021-20540
5. Indicate Type of Lease LEASE <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> P <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name West Bravo Dome Unit
8. Well Number 271F
9. OGRID Number 495
10. Pool name or Wildcat West Bravo Dome CO2 Gas
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4333 GR

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. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other X CO2	
2. Name of Operator Hess Corporation	
3. Address of Operator PO Box 840 Seminole TX 79360	
4. Well Location Unit Letter F : 1650 feet from the N line and 1650 feet from the W line Section 27 Township 18N Range 30E NMPM County Harding	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4333 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: Step Rate Test <input checked="" type="checkbox"/>		OTHER: <input 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.

SHUT IN INJECTION WELL(S) A MINIMUM OF 24 HOURS PRIOR TO TEST  
RIG UP PUMP TRUCK AND CARDINAL'S CONTROL TRAILER  
GOIH AND SET PRESSURE TOOL ABOVE CSG SHOE  
RECORD BHP FOR MINIMUM 15 MINUTES PRIOR TO STARTING TEST  
START TEST @ 100 BPD AND GO FOR ONE HOUR PER STEP  
INCREASE RATE BY 100 BPD FOR FIRST 3 STEPS (1830-271F)  
AFTER 3 STEPS INCREASE RATE BY 200 BPD PER STEP  
STEP SIZE MAY BE INCREASED LATER IN TEST IF NEEDED  
AFTER FINAL TEST SHUT IN WELL AND RECORD DATA FOR 30 MINUTES  
POOH & RD  
FOR 1830-092F, FOLLOW ABOVE PROCEDURE EXCEPT FOR THE FOLLOWING  
AFTER THE FIRST 3 STEPS @ 100 BPD CONTINUE WITH 100 BPD STEP INCREASE FOR TWO  
MORE STEPS BEFORE GOING TO 200 BPD INCREASES PER STEP  
MAY NEED TO MODIFY ON WELL SITE  
SEE PREVIOUS TEST

NOTE: AS REQUIRED BY THE STATE WE WILL GO WITH ONE HOUR STEP LENGTH FOR THESE WELLS

Spud Date:

Rig Release Date:

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

SIGNATURE Rita C Smith TITLE Senior Regulatory Specialist DATE 08/10/2012

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 8/17/2012

Conditions of Approval (if any):