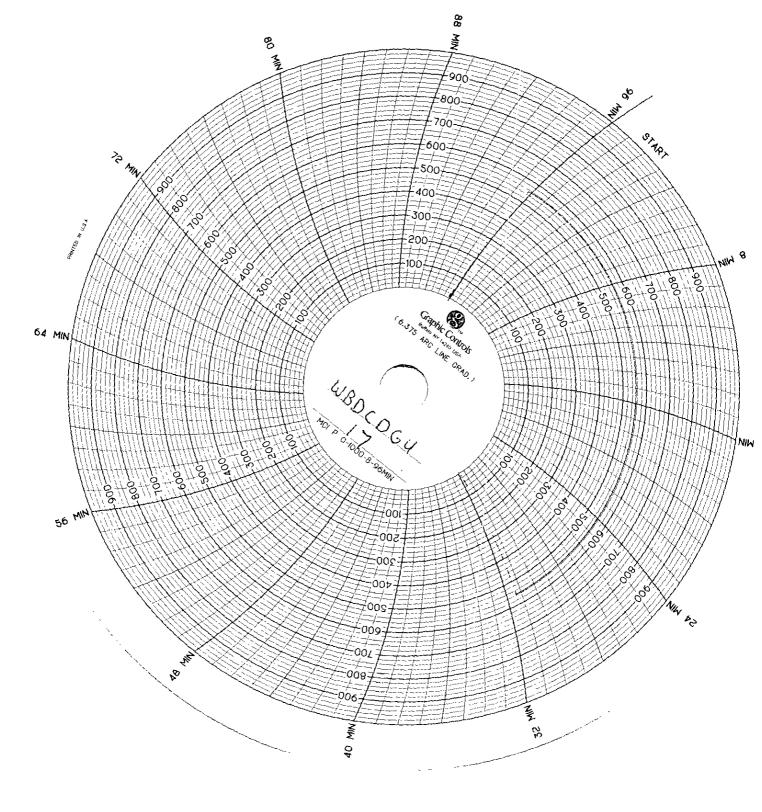
Submit 3 Copies To Appropriate District Office State of Rew Mexico	Form C-103
District I Energy, Minerals and Natural Resou	May 27, 2004 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Ave. Artesia NM 88210 OIL CONSERVATION DIVISION	ON 30-021-20191
1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 1220 South St. Francis Dr. Oil Consocraption Di	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe St. Francis	
1220 S. St. Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 87.	
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	West Bravo Dome CDG Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other CO2 Supply	8. Well Number 17
2. Name of Operator	9. OGRID Number
Hess Corporation	10. Pool name or Wildcat
3. Address of Operator P.O. Box 840 Seminole, TX 79360	West Bravo Dome
4. Well Location	
Unit Letter G: 1784 feet from the North line	e and 2364 feet from the East line
Section 33 Township 19N Range	29E NMPM County Harding
11. Elevation (Show whether DR, RKB, RT 5395'	, GR, etc.)
Pit or Below-grade Tank Application or Closure	
Pit type Depth to Groundwater Distance from nearest fresh water well	
Pit Liner Thickness: mil Below-Grade Tank: Volume	bbls; Construction Material
12. Check Appropriate Box to Indicate Nature of	Notice, Report or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
	MAL WORK ALTERING CASING
	ENCE DRILLING OPNS.☐ P AND A ☐ G/CEMENT JOB ☐
	-
OTHER: OTHER OTHER OTHER	: Casing Integrity Test Letails, and give pertinent dates, including estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Comple	
or recompletion.	
8/8/2006	
Pressure tested casing to 550 psi for 30 min. Held OK. Chart attached	. TA'd well.
Hess Corporation respectfully requests to continue TA'd status on well.	
I hereby certify that the information above is true and complete to the best of my	lucandadas and halla Care as
grade tank has been will be constructed or closed according to NMOCD guidelines , a general	I permit or an (attached) alternative OCD-approved plan.
SIGNATURE (ONO). W OTC TITLE Senior Adv	risor/Regulatory DATE 8/22/2006
Type or print name Carol J. Moore E-mail address: cr	noore@hess.com Telephone No. (432)758-6738
	ICT CHORDINGCIA
APPROVED BY:	ICT SUPERVISOR DATE 9-12-06
(/ / /	



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