Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office May 27, 2004 Energy, Minerals and Natural Resources District I WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 30-021-20123 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease H220 South SVF Tanks Dr. District III STATE X FEE | 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV 1220 S. St. Francis Dr., Santa Fe, NM 2007 JUN 29 PM 12 24 L-5813 87505 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 A West Bravo Dome Unit DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 032F 1. Type of Well: Oil Well Gas Well Other CO2 Supply 2. Name of Operator 9. OGRID Number 495 **Hess Corporation** 10. Pool name or Wildcat 3. Address of Operator West Bravo Dome CO2 Gas (96387) P.O. Box 840 Seminole, TX 79360 4. Well Location 1650 North 1880 Unit Letter feet from the line and feet from the West line **NMPM** Section Township 19N Range 29E County Harding 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4677' Pit or Below-grade Tank Application 🔲 or Closure 🔲 Distance from nearest surface water_ Pit type Depth to Groundwater Distance from nearest fresh water well____ Pit Liner Thickness: 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: PERFORM REMEDIAL WORK □ PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS.

☐ P AND A CASING/CEMENT JOB **PULL OR ALTER CASING** MULTIPLE COMPL Name Change OTHER: **T** OTHER: 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Change name from WBDGU #10 to West Bravo Dome Gas Unit #032F. I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or belowgrade tank has been/will be constructed or closed according to NMOCD guidelines [], a general permit [] or an (attached) alternative OCD-approved plan []. TITLE Senior Advisor/Regulatory DATE 06/27/07 **SIGNATURE** E-mail address: cmoore@hess.com Type or print name Carol J. Moore Telephone No. (432)758-6738 For State Use Only DISTRICT SUPERVISOR APPROVED BY:

Conditions of Approval (if any):