

Submit 1 Copy To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

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

WELL API NO.	30-021-05091
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name MITCHELL	
8. Well Number	201F
9. OGRID Number	495
10. Pool name or Wildcat (96387) West Bravo Dome CO2 Gas	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4466'	

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 ☐ Gas Well ☒ Other CO2 SUPPLY

2. Name of Operator
HESS Corporation

3. Address of Operator
PO Box 840
Seminole TX 79360

4. Well Location
Unit Letter F : 1980 feet from the SOUTH line and 1980 feet from the WEST line
Section 20 Township 19N Range 30E NMPM County HARDING

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: YEARLY BRADENHEAD TEST (SI) <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.

Mitchell 1930-201F
Annual Bradenhead Test (SI Well)

Year	Date	Tbg PSI	Csg PSI	Bleed Down Time
2010	1/25	0	0	
2011				
2012				
2013				
2014				
2015				
2016				
2017				
2018				
2019				
2020				

Note: Well TxA with two cement plugs

This approval for temporary abandonment
expires 8/8/2011

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



TITLE ENGINEERING TECH

DATE 1/26/2010

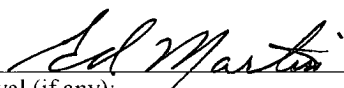
Type or print name RITA C. SMITH

E-mail address: rsmith@hess.com

PHONE: 432-758-6726

For State Use Only

APPROVED BY:



TITLE

DISTRICT SUPERVISOR

DATE 5/11/10

Conditions of Approval (if any):