Office Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	October 13, 2009
1625 N. French Dr., Hobbs, NM 88240 District <u>II</u>	OH COMBRENE TO THE TOTAL TOTAL TO THE TOTAL	WELL API NO. 30-021-20512
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III 1220 South St. Francis Dr. 1200 Río Brazos Rd., Aztec, NM 87410		STATE FEE 🔀
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		West Bravo Dome Unit
PROPOSALS.)		
1. Type of Well: Oil Well Gas Well Other CO2 Supply		8. Well Number 201J
2. Name of Operator Hess Corporation		9. OGRID Number 495
3. Address of Operator PO Box 840		10. Pool name or Wildcat (96387)
Seminole TX 79360		West Bravo Dome CO2 Gas
4. Well Location		
	: 1650 feet from the SOUTH line and	
Section 20	Township 19N Range 29E	NMPM County HARDING
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5419'		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK		
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE D	PRILLING OPNS. P AND A
PULL OR ALTER CASING		ENT JOB
DOWNHOLE COMMINGLE		
OTHER: frac well, & fl	Lowback 🛛 OTHER:	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date		
	vork). SEE RULE 19.15.7.14 NMAC. For Multiple C	Completions: Attach wellbore diagram of
proposed completion or re-	completion.	
Intent wee	ek of 8/23/2010	
The procedures for the fracs are:		
MIRU		
Kill well		
Frac pump schedule		
RDMO Halliburton		
Flow back to frac tank until sand production ceases or 72 hrs		
(whichever comes first)		
Put down p	production line.	
5/20/201	•	
Spud Date: 6/09/201	Rig Release Date:	
I haraby cartify that the information	a above is true and complete to the best of my knowled	doe and halist
Thereby certify that the information	above is the and complete to the best of my knowled	age and Denet.
12/2 () C	` \	
SIGNATURE	TITLE Engineering T	ech DATE 8/19/2010
Type or print name Rita C S	Smith Email address remitheh	PSS COM DIJONE, 432-758-6726
Type or print name Rita C. Smith E-mail address: rsmith@hess.com PHONE: 432-758-6726 For State Use Only		
101	niethiat elih	IEDVICAD
APPROVED BY:	Martin TITLE DISTRICT SUP	ERVIDUR DATE 8/24/10
Conditions of Approval (if any):	ν	\$ -/