

Submit 3 Copies 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  
May 27, 2004

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

|                                                                                                                                                                                                               |  |                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.) |  | WELL API NO.<br>30-025-05875                                                                        |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other TA'd well                                                                                                          |  | 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 2. Name of Operator<br>Amerada Hess Corporation                                                                                                                                                               |  | 6. State Oil & Gas Lease No.                                                                        |
| 3. Address of Operator<br>P.O. Box 840 Seminole, TX 79360                                                                                                                                                     |  | 7. Lease Name or Unit Agreement Name<br>North Monument G/SA Unit Blk. 23                            |
| 4. Well Location<br>Unit Letter <u>F</u> : 1980 feet from the <u>North</u> line and 1980 feet from the <u>West</u> line<br>Section <u>3</u> Township <u>20S</u> Range <u>37E</u> NMPM County <u>Lea</u>       |  | 8. Well Number <u>06</u>                                                                            |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)                                                                                                                                                            |  | 9. OGRID Number <u>495</u>                                                                          |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>                                                                                                              |  |                                                                                                     |
| Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____                                                                              |  |                                                                                                     |
| Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____                                                                                                               |  |                                                                                                     |

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

|                                                |                                           |                                                                    |                                          |
|------------------------------------------------|-------------------------------------------|--------------------------------------------------------------------|------------------------------------------|
| <b>NOTICE OF INTENTION TO:</b>                 |                                           | <b>SUBSEQUENT REPORT OF:</b>                                       |                                          |
| 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"/>                         |                                          |
| OTHER: <input type="checkbox"/>                |                                           | OTHER: Continue TA well status <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Press. test csg, chart, and continue TA'd status on well. Chart attached.

This Approval of Temporary  
Abandonment Expires 2/24/11



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 below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Carol J. Moore TITLE Senior Advisor/Regulatory DATE 2/24/2006

Type or print name Carol J. Moore

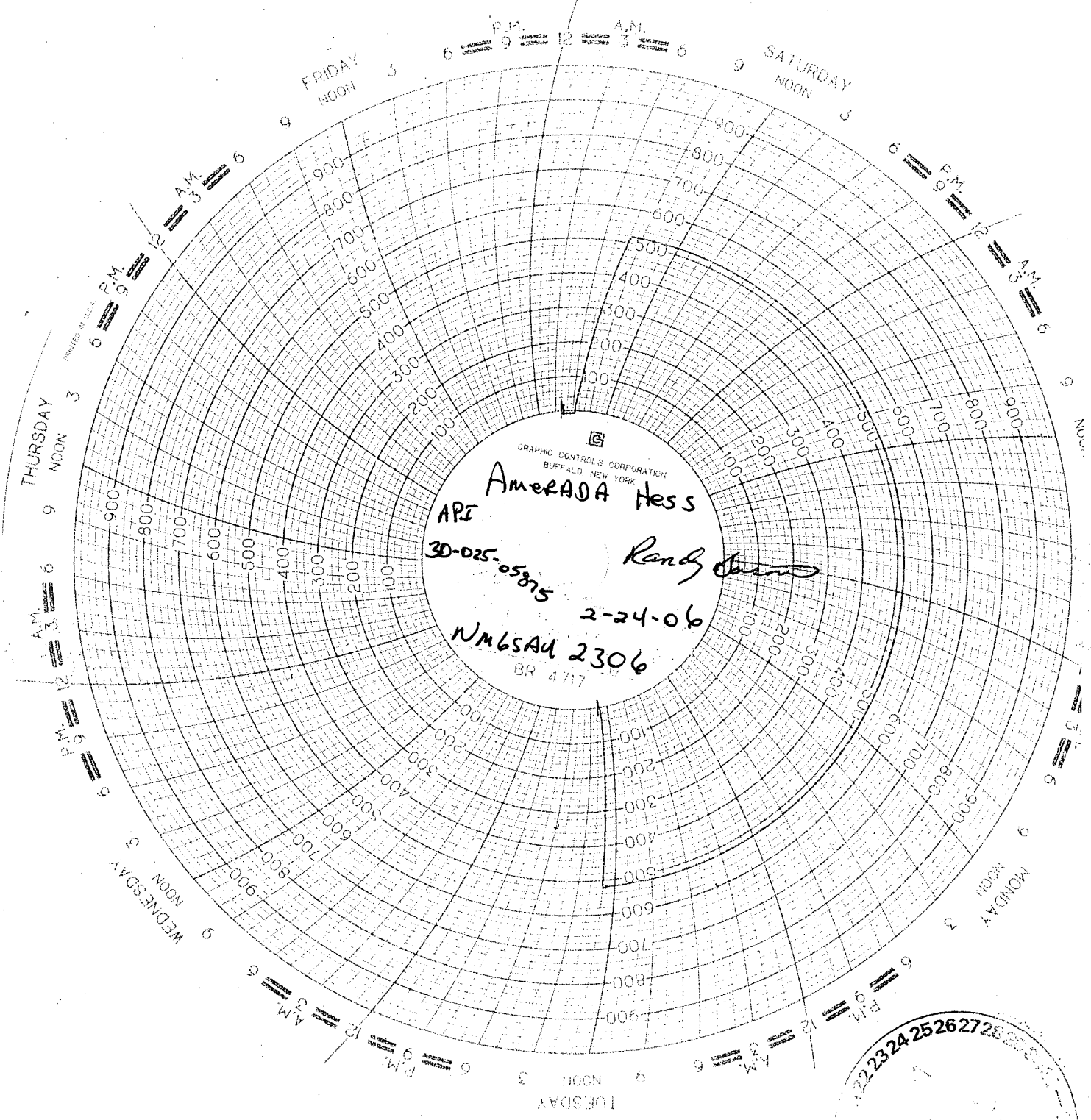
E-mail address: cmoore@hess.com

Telephone No. (432)758-6738

**For State Use Only**

APPROVED BY: Larry W. Wink TITLE OC FIELD REPRESENTATIVE II / STAFF MANAGER DATE FEB 27 2006

Conditions of Approval (if any):



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