Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103		
District I	Energy, Minerals and Natural Resources		Resources _–	May 27, 2004		
1625 N. French Dr., Hobbs, NM 88240 District II	∆ 88240			WELL API NO. 30-025-07747		
1301 W. Grand Ave., Artesia, NM 88210				5. Indicate Type of Lease		
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			STATE [FEE X	
District IV	Santa Fe, NM 87505			6. State Oil & Ga		
1220 S. St. Francis Dr., Santa Fe, NM 87505						
	ICES AND REPORTS O	N WELLS		7 Lease Name or	r 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			ACK TO A	Warren McKee Unit		
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other TA'd well			F	8. Well Number 601		
2. Name of Operator				9. OGRID Numb	er	
Amerada Hess Corporation				495		
3. Address of Operator				10. Pool name or Wildcat		
P.O. Box 840 Seminole, TX 79360				Warren McKee		
4. Well Location						
Unit Letter P: 330 feet from the South line and 330 feet from the East line						
Section 7 Township 20S Range 38E NMPM County Lea						
11. Elevation (Show whether DR, RKB, RT, GR, etc.)						
Pit or Below-grade Tank Application or Closure						
ł			II Dista	nce from nearest surf		
		earest fresh water			ace 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						
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
PERFORM REMEDIAL WORK						
			MMENCE DRIL		P AND A	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN					_	
			0	TALL	_	
OTHER:	1			TA'd well status	<u> </u>	
13. Describe proposed or com					es, including estimated date am of proposed completion	
or recompletion.	OIK). SEE KULE 1105.	roi Multiple C	ompletions: Atta	ich wendore diagi	am of proposed completion	
or recompletion.						
Press. test csg, chart, and co	ntinue TA'd status on wel	II. Chart attache	ed.			
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I hereby certify that the information						
	above is true and compl	ete to the best o	f my knowledge	and belief. I furth	er certify that any pit or helow-	
grade tank has been/will be constructed o						
(10.00		D guidelines □, a	general permit 🗍 o	r an (attached) altern	ative OCD-approved plan .	
grade tank has been/with be constructed of SIGNATURE		D guidelines □, a		r an (attached) altern		
SIGNATURE (avo	or closed according to NMOCI	D guidelines □, a :TITLE_Senio	general permit ☐ o r Advisor/Regula	r an (attached) altern tory	ative OCD-approved plan . DATE 2/27/2006	
SIGNATURE Carol J. Moore	or closed according to NMOCI	D guidelines □, a :TITLE_Senio	general permit 🗍 o	r an (attached) altern tory	ative OCD-approved plan .	
SIGNATURE (avo	or closed according to NMOCI	D guidelines □, a :TITLE_Senio	general permit ☐ o r Advisor/Regula	r an (attached) altern tory ss.com Te	ative OCD-approved plan □. DATE2/27/2006 elephone No. (432)758-6738	
Type or print name Carol J. Moore For State Use Only APPROVED BY:	or closed according to NMOCI	D guidelines , a TITLE Senio E-mail addres	general permit 🗍 or Advisor/Regula	r an (attached) altern tory	ative OCD-approved plan □. DATE2/27/2006 elephone No. (432)758-6738	
Type or print name Carol J. Moore For State Use Only	or closed according to NMOCI	D guidelines [], a TITLE Senio E-mail addres	general permit 🗍 or Advisor/Regula	r an (attached) altern tory ss.com Te	ative OCD-approved plan □. DATE2/27/2006 elephone No. (432)758-6738	

