Submit 3 Copies to Appropriate District Office

CONDITIONS OF AFFROVAL, IF ANY:

## State of New Mexico Energy, Minerals and Natural Resources Department

Fee		C-	Į Q.	,
Re	rlas	4 1	1-1	-51

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	OIL CONSERVATIO P.O. Box 208 Santa Fe, New Mexico	8	WELL API NO.	
P.O. Drawer DD, Artesia, NM 88210	bella i c, new inches	07504-2000	5. Indicate Type of Lesse STATE	FEE 🛚
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	
( DO NOT USE THIS FORM FOR PRO DIFFERENT RESER	CES AND REPORTS ON WEL POSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PER- 101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Nam C. W. Robinson	ne
1. Type of Well: ORL CAS WELL XX	OTHER.		o. w. Robinson	
2. Name of Operator			8. Well No.	
Amerada Hess Corporat  3. Address of Operator	ion		9. Pool name or Wildcat	
Drawer D, Monument, N	New Mexico 88265		Moore Devonian	
4. Well Location				
Unit Letter A : 660	Feet From The North	Line and660	Feet From The East	Line
Section 23	Township 11S Ra	nge 32E	<b>NMPM</b> Lea	County
	10. Elevation (Show whether i		V////////	
	<u>/////}</u>			
	Appropriate Box to Indicate N		•	
NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	X ALTERING CASIN	1G
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABAN	IDONMENT
PULL OR ALTER CASING	_	CASING TEST AND CE	MENT JOB	
OTHER:		OTHER:		
	· · · · · · · · · · · · · · · · · · ·			
<ol> <li>Describe Proposed or Completed Opera work) SEE RULE 1103.</li> </ol>	ионя (Стеату якие ви рептели ветвия, вя	a give perimeni aaies, inciu	ung estimatea date of starting any propos	ea
12-21 to 12-29-88				
& checked top of fish Acidized Devonian Zon HCL dbl. inh. acid.	COH w/rods & pump. Insolved at 9925'. Established in 5-1/2" csg. perfs. for Swabbed load. TIH w/ton pump & rods & attemporaluation.	d injection rat r. 10,577' to l bg. & hit obstr	e. Pulled tbg. & bit. 0,590' w/1000 gal. 15% uction at 3507'. Set	NEFE
I hereby certify that the information above is true SIGNATURE	e and complete to the best of my knowledge and	Sunu Adm	Svc. Date 1–2 Telephone no.	7–89
(This space for State Use) ORIGINAL SIGNS	D BY JERRY SEXTON		JAN	3 1 1989
APPROVED BY DISTRICT	I SUPERVISOR TITIE	LE	DATE	

RECEIVES

OCD HOBBS OFFICE