	-		
NO OF OFFS RECEIVED			
DISTRIBUTION			Form C-103
SAMEA FE			Supersedes Old C-102 and C-103
FILE		SERVATION COMMISSION	Effective 1-1-65
U.S.G.S.	-		· · · · · · · · · · · · · · · · · · ·
LAND OFFICE	-		5a. Indicate Type of Lease
OPERATOR	-		State Fee XX
			5, State Oil & Gas Lease No.
SUND	DY NOTICES AND CONCERNS		
DO NOT USE THIS FORM FOR PORT USE "APPLICA	RY NOTICES AND REPORTS OF AND REPORTS OF PLUG	N WELLS BACK TO A DIFFERENT RESERVOIR.	
			7. Unit Agreement Name
WELL WELL	OTHER-		7. Sint Agreement Name
2. Name of Operator			8. Farm or Lease Name
Amerada Hess Cor	H.C. Posey "A"		
3. Address of Operator			3. Well No.
Drawer "D", Monument, New Mexico 88265			1 6
4. Location of Well			
UNIT LETTER H 990 FEET FROM THE EAST LINE AND 1650			10. Field and Pool, or Wildcat
	FEET FROM THE	LINE AND FEET PRO	East Caprock - Dev.
THE North	11 TOWNSHIP 12-S	32-F	
	TOWNSHIP	RANGE NMP	~ <u> </u>
15. Elevation (Show whether DF, RT, GR, etc.) 4349'			12. County
16.			Lea
	Appropriate Box To Indicate N	Nature of Notice, Report or O	ther Data
NOTICE OF I	NTENTION TO:	SUBSEQUEN	IT REPORT OF:
PERFORM REMEDIAL WORK	—		
TEMPORARILY ABANDON	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
PULL OR ALTER CASING	`	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
	CHANGE PLANS	CASING TEST AND CEMENT JQB	
OTHER	 	OTHER	
7 Describe Proposed on Complete 1.0			

17. 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.

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Pulled and laid down rods, pump and 3-1/2" tubing.

Ran 2-7/8" tubing with Reda pumping equipment.

Resumed production. Status changed from pumping with beam type

unit to pumping by Reda.

8. I hereby certify that the	information above is true and com	plete to the best of my knowledge and belief.		
IGNED I TO	Black	Supver., Admin. Services	DATE 1-28-75	
PROVED BY	Jo			
ONDITIONS OF APPROVA	L. IF ANY:	TITLE	DATE	

a the state of the

JAN 23 1975

OIL CONSERVATION COMM. HOBBS, N. M.