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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS (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.)	
1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	
2. Name of Operator Amerada Hess Corporation	
3. Address of Operator Drawer "D", Monument, New Mexico 88265	
4. Location of Well UNIT LETTER <u>B</u> <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM THE <u>East</u> LINE, SECTION <u>14</u> TOWNSHIP <u>12-S</u> RANGE <u>32-E</u> NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.) 4354' DF	

7. Unit Agreement Name
8. Farm or Lease Name H.C. Posey "A"
9. Well No. #2
10. Field and Pool, or Wildcat East Caprock
12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <u>Convert to SWD & Change Name</u> <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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.

Plan to: Squeeze Wolfcamp zone perforations 8404' to 8713'. Drill out and test 5-1/2" casing. Drill out bridge plugs at 8797' and 11,139'. Test 5-1/2" casing. Clean out to TD at 11,651'. Run packer with 3-1/2" OD Plastic coated tubing. Treat Devonian zone ~~with~~ from 11,205' to 11,651' with 10,000 gals. 28% HCL. Convert from T.A. in Wolfcamp zone to Salt Water Disposal in Devonian zone.

Change name from H.C. Posey "A" #4 to EAST CAPROCK SWD #2

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>[Signature]</u>	TITLE <u>Supver., Admin. Services</u>	DATE <u>3-6-75</u>
APPROVED BY <u>[Signature]</u>	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____		