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LAND OFFICE		
OPERATOR		

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. <div>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-</div>	7. Unit Agreement Name
2. Name of Operator Amerada Hess Corporation	8. Farm or Lease Name H. C. Posey A
3. Address of Operator Drawer "D" - Monument, New Mexico 88265	9. Well No. 4
4. Location of Well UNIT LETTER B, 330 FEET FROM THE North LINE AND 2310 FEET FROM THE East LINE, SECTION 14 TOWNSHIP 12-S RANGE 32-E NMPM.	10. Field and Pool, or Wildcat East Caprock
15. Elevation (Show whether DF, RT, GR, etc.) 4354' DF	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 <input type="checkbox"/>	OTHER T. A. <input checked="" 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.

Closed all valves and T. A. December, 1968 due to low production.

Evaluating possible recompletion as an oil well or converting to salt water disposal.

Work to be done in 3rd quarter, 1975

Expires
10/11/75

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

SIGNED [Signature] TITLE Supvr. Admin. Services DATE 10-11-74

APPROVED BY Joe D. Ramey TITLE Dist. I, Supv. DATE 10-11-74

CONDITIONS OF APPROVAL, IF ANY: