

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
E-1347

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 - L" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Salt Water Disposal	7. Unit Agreement Name
2. Name of Operator Amerada Hess Corporation	8. Farm or Lease Name Bailey S.W.D.
3. Address of Operator Drawer D, Monument, New Mexico 88265	9. Well No. 4
4. Location of Well UNIT LETTER N 660 FEET FROM THE South LINE AND 1980 FEET FROM West LINE, SECTION 35 TOWNSHIP 11-S RANGE 33-E N.M.P.M.	10. Field and Pool, or Wildcat Bailey
15. Elevation (Show whether DF, RT, GR, etc.) 4252' 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 checked="" 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 <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.

February 1981

Plan to pull 4-1/2" ICP tubing, run caliper log from 10,980' to 11,180'. Repair 7-5/8" casing leak, run 5-1/2" liner from surface to 10,980'. Circulate cement, run 3-1/2" IPC tubing, re-run tubing and resume disposal operations.

THE COMMISSION MUST BE NOTIFIED  
24 HOURS PRIOR TO COMMENCING WORK

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

SIGNED <u>E. B. Baker</u>	TITLE <u>Supv. Adm. Ser.</u>	DATE <u>2/23/81</u>
APPROVED BY <u>Dick L. Sexton</u>	TITLE <u></u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		