

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N. M. OIL CONS. COMMISSION
SUBMIT IN TRIPLI
P. O. BOX 980
BOBBY, NEW MEXICO 88240

Project Bureau No. 1004-0135

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-31258

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Amerada Hess

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Vest Ranch Queen Assoc.

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 33, T14S, R30E

12. COUNTY OR PARISH 13. STATE

Chaves

NM

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" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Charles W. Hicks

3. ADDRESS OF OPERATOR

1500 West Third Street, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)

At surface

660' FSL & 660' FWL, Section 33, T14S, R30E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, ST, GR, etc.)

3922' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANE

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and names pertinent to this work.)

Surface abandonment requirements have been completed as follows:

1. The well marker has been corrected to read Section 33, T14S, R30E.
2. The 13' gas line stub has been removed from the pad back to the riser which Cabot Corporation says is on their right-of-way. They intend to leave this riser for future connections.

The location is ready for final inspection.

RECEIVED

APR 13 8 30 AM '88

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

18. I hereby certify that the foregoing is true and correct

SIGNED Charles W. Hicks

TITLE Operator

DATE April 1988

(This space for Federal or State office use)

APPROVED BY J. E. Ham

TITLE Supr. Min. Res. Spec.

DATE May 18, 1988

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED

JUN 6 1988

**OO:
HOBBS OFFICE**