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| OPERATOR               |  |

|   |                              |
|---|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |
| B10083                                    |                              |

|   |  |
|---|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.<br>USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) |  |
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>  |  |
| 2. Name of Operator<br>Amerada Hess Corporation   |  |
| 3. Address of Operator<br>Drawer D, Monument, New Mexico 88265  |  |
| 4. Location of Well<br>UNIT LETTER N 660 FEET FROM THE South LINE AND 1980 FEET FROM<br>THE West LINE, SECTION 23 TOWNSHIP 12S RANGE 33E NMPM.  |  |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>4632' DF   |  |

|   |
|---|
| 7. Unit Agreement Name                              |
| 8. Farm or Lease Name<br>State BT "E"               |
| 9. Well No.<br>1                                    |
| 10. Field and Pool, or WHdcat<br>Hightower Devonian |
| 12. County<br>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"/>                               | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input checked="" type="checkbox"/>    | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>                                 | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>                                | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <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.

8-26-83 to 9-1-83 - Pulled rods, pump & tbq. Ran pkr. & 2-3/8" tbq. & set pkr. at 9943'. Loaded 5-1/2" csg. & press. to 500#. Acidized Devonian zone thru 5-1/2" csg. perf. fr. 9985' to 9996' w/1000 gal. 15% acid. Swabbed load. Cleaned out fill inside 5-1/2" csg. fr. 9986' to 9996' w/hydrostatic bailer. Ran 2-3/8" tbq. set at 2134', ran pump & rods & resumed pumping.

9-13-83 - Pulled rods & pump. Re-set tbq. at 1942', re-ran pump & rods & resumed pumping.

Test of 9-20-83: Pumped 1 b.o. & 103 b.w. in 24 hrs. on 8.5-64" SPM.

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

|  |                              |                         |
|--|------------------------------|-------------------------|
| SIGNED <u>EB Fisher</u>                  | TITLE <u>Supv. Adm. Ser.</u> | DATE <u>9-26-83</u>     |
| ORIGINAL SIGNED BY JERRY SEXTON          |                              |                         |
| APPROVED BY <u>DISTRICT 1 SUPERVISOR</u> | TITLE _____                  | DATE <u>SEP 28 1983</u> |
| CONDITIONS OF APPROVAL, IF ANY:          |                              |                         |

RECEIVED  
SEP 27 1983  
O.C.D.  
HOBBS OFFICE