| NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE | NEW M | EXICO OIL CONSERVATION C | - NOISSION | Form C-103 Supersedes Old C-102 and C-103 Effective 1-1-65 |
|--|--|---|----------------------------------|---|
| | | | | 5a. Indicate Type of Lease |
| FILE | | | | |
| U.S.G.S. | | | | State Patent Fee |
| LAND OFFICE | | | | 5. State Oil & Gas Lease No. |
| OPERATOR | | | | |
| (DO NOT USE THIS FORM USE *** | | D REPORTS ON WELLS TO DEEPEN OR PLUG BACK TO A DIFFER FORM C-101) FOR SUCH PROPOSALS. | IENT RESERVOIR. | 7, Unit Agreement Name |
| GA5 | OTHER. Plu | ig and Abandonment | | News |
| WELL WELL OTHER. | | | | 8. Farm or Lease Name |
| Amerada Hess Cor | Rose Eaves "A" | | | |
| 3. Address of Operator 1209 South Main, Lovington, New Mexico | | | | 9. Well No. #1 |
| 1207 South Here | HOVINE VOIL, NON - | | | 10. Field and Pool, or Wildcat |
| 4. Location of Well | 660* | North | 19801 FEET FROM | Knewles Devonian |
| UNIT LETTER | FEET FRO | OM THE LINE AND | 38-E NMPM | |
| | | vation (Show whether DF, RT, GR, 24 * DF | | 12. County |
| Li. NOTIC | Check Appropriate Bo E OF INTENTION TO: | ox To Indicate Nature of N | otice, Report or Ot SUBSEQUEN | her Data T REPORT OF: |
| PERFORM REMEDIAL WORK | | | ORK | ALTERING CASING PLUG AND ABANDONMENT |
| OTHER | | | | verestimated date of starting any propose |

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.

Rese Eaves "A" #1 - Rum Cast Iron Plug to 12,000' with 5 sk. Cement on top of Plug, top of Cement @ 11,958'. Loaded Hole with 10# Brine Mud and cut 5-1/2" esg. @ 5528' and spoted 35 sk. plug 5528' - 5428', and spoted 35 sk. plug 4847' - 4647'. Cut 8-5/8" Csg. @ 820' and spoted 70 sk. plug @ 870' -770', and 70 sk. plug 310' - 210', and 20 sk. plug 0' - 24' and install dry hole mak marker. The above work was done on 12-26-72 and completed on 1-5-73

| 16 Thereby certify that the information above is true and complete to the best of my knowledge | and belief. |
|--|-------------|
| 16 Thereby certily that the information solution | |

| SIGNED AL Standle and | Area Superintendent | DATE 1-9-73 |
|----------------------------|---------------------|-------------|
| APPROVED BY John W. Rungen | TITLS | DATE |

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CL CURCENSSIER CLEEF. BODIE BEIZ