Submit 3 Copies to Appropriate District Office	State of New Mexico Er y, Minerals and Natural Resources Departmen		Form C-103
DISTRICT I	RICT II BOX 1980, HODDA, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088 RICT II		Revised 1-1-89
P.O. Box 1980, Hobbs, NM 88240			WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			3002504045
DISTRICT III		5. Indicate Type of Lesse	
1000 Rio Brazos Rd., Aziec, NM 87410		STATE X FEE	
		6. State Oil & Gas Lease No. B-4086-2	
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.)			
		7. Lease Name or Unit Agreement Name	
1. Type of Well:			
AST X	OTHER.		NORTH MONUMENT G/SA UNIT
2. Name of Operator		8. Well No.	
AMERADA HESS CORPORATION 3. Address of Operator		8	
!		9. Pool name or Wildcat	
POST OFFICE DRAWER D, MONUMENT, NEW MEXICO 88265 Well Location		EUNICE MONUMENT G/SA	
Unit Letter H : 2310 Feet From The NORTH Line and 330 Feet From The EAST Line			
Section 24	Township 19S Range	36E	NMPM LEA COURT
10. Elevation (Show whether DF, RKB, RT, GR, etc.)			
Check Appropriate Roy to Indicate Notice of No.			
NOTICE OF WITH PROPERTY OF MINICALE NATURE OF NOTICE, Report, or Other Data			
		SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS PLUG AND ABANDONMENT			OPNS. PLUG AND ABANDONMENT
ULL OR ALTER CASING CASING TEST AND C			
OTHER: CEMENT TO 6	OTHER:		
12. 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. NMGSAU #408 Plant Move in and rig up pulling unit. (Casing Integrity test was performed and leaks found from 725! - 1 157!)			
110m /25 = 1,10/ /. PidNS dre to solleeze the leak with micro-mathix coment during			
out, pressure test and return the well to production.			
		_	
I hereby ceruly that the information above is true and complete to the post of my knowledge and belief.			
SKNATURE Sr. Staff Assistant DATE 02-01-94			
TYPE OR FRONT NAME TO	' /		
THE ON PRINT NAME	rry L. Harvey		телерноме No. 393-2144

- m.e -

(This space for State Use)