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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Amerada Hess Corporation		8. Farm or Lease Name J.R. Phillips
3. Address of Operator Drawer "D", Monument, New Mexico 88265		9. Well No. 8
4. Location of Well UNIT LETTER <u>G</u> <u>2088.5</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>20-S</u> RANGE <u>36-E</u> NMPM.		10. Field and Pool, or Wildcat Eunice-Monument (G-SA)
15. Elevation (Show whether DF, RT, GR, etc.) 3580' DF		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Pulled production equipment. McCullough perforated 7" casing with one shot at each of the following intervals: 3701', 3707', 3708', 3709', 3711', 3717', 3718' and 3723'. Reran tubing and packer. Dowell acidized perfs. 3682' to 3724' with 3000 gals. 15% NE acid using ball sealers. Reran production equipment and resumed production. No change in prod. status.

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

SIGNED M O Black TITLE Supver., Admin. Services DATE 1-28-74

APPROVED BY _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____