

**DISTRICT I**  
P.O. Box 1980, Hobbs, NM 88240

**DISTRICT II**  
P.O. Drawer DD, Artesia, NM 88210

**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-04141

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-154

7. Lease Name or Unit Agreement Name

State "D"

8. Well No.

3

9. Pool name or Wildcat

Eunice Monument G/SA

**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. Type of Well:

OIL  
WELL ☐

GAS  
WELL ☒

OTHER

2. Name of Operator

Amerada Hess Corporation

3. Address of Operator

Drawer D, Monument, New Mexico 88265

4. Well Location

Unit Letter E : 1980 Feet From The North Line and 1980 Feet From The West Line

Section 1 Township 20-S Range 36-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3582' DF

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐ Status Change. ☒

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.

8-30 thru 9-24-90

MIRU pulling unit, installed BOP & TOH w/tbg. & pkr. Ran 2-3/8" tbg. set OE at 3621'. Removed BOP & installed well head. Ran pump & rods & closed well in. RDPU & cleaned location. Set pumping unit & motor & began pumping well on 9-24-90. Well status changed fr. flowing gas well to pumping gas well.

Test of 9-25-90: Prod. 6 b.w. & 92 MCFGPD in 24 hrs.

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

SIGNATURE R. L. Wheeler, Jr.

TITLE Supv. Adm. Svc.

DATE 9-27-90

TYPE OR PRINT NAME R. L. Wheeler, Jr.

505  
TELEPHONE NO. 393-2144

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: