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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 checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-154	
7. Unit Agreement Name	
8. Farm or Lease Name State "D"	
9. Well No. 4	
10. Field and Pool, or Wildcat Eunice-Monument (G-SA)	
12. County Lea	

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO TEMPORARILY ABANDON OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT TO PLUG BACK" (FORM C-101) FOR SUCH PROPOSALS.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
Amerada Hess Corporation

3. Address of Operator
Drawer "D", Monument, New Mexico 88265

4. Location of Well
UNIT LETTER C 660 FEET FROM THE North LINE AND 1980 FEET FROM West THE LINE; SECTION 1 TOWNSHIP 20-S RANGE 36-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <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.

Plan to: Set Cast Iron bridge plug at approx. 3670' with 10' cement on top of plug.
Run GR-N log from 2200' to 3600'. Perforate 5-1/2" casing in G-SA zone as per logs. Acidize perforations with 15% HCl acid. Swab test and Resume production as a gas well in oil reservoir.

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

SIGNED [Signature] TITLE Supvr., Admin. Services DATE 3-4-75

APPROVED BY [Signature] TITLE Joe B. [Signature] DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY: