

**DISTRICT I**

1625 N. French Dr., Hobbs, NM 88240

**DISTRICT II**

811 S. First, Artesia, NM 88210

**DISTRICT III**

1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**

1220 South St. Francis Dr.

Santa Fe, NM 87504

WELL API NO.	30-025-04174
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	Federal NM-1150
7. Lease Name or Unit Agreement Name	North Monument G/SA Unit Blk. 18
8. Well No.	17
9. Pool Name or Wildcat	Eunice Monument G/SA
10. Elevation (Show whether DF, RKB, RT,GR, etc.)	

SUNDY 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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER TA'd Well.
2. Name of Operator	Amerada Hess Corporation
3. Address of Operator	P.O. Box 840, Seminole, TX 79360
4. Well Location	Unit Letter <u>A</u> <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>3</u> Township <u>020S</u> Range <u>036E</u> NMPM <u>Lea</u> COUNTY
10. Elevation (Show whether DF, RKB, RT,GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input checked="" type="checkbox"/>

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.

1-31-2001

Press. tested csg. to 520 PSI for 30 min. Held OK. Chart attached.

Amerada Hess Corporation respectfully request a continued TA'd status on well for future North Monument Grayburg San Andres Unit operations.

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

SIGNATURE	<u>Roy L. Wheeler, Jr.</u>	TITLE	<u>Bus. Svc. Spec. II</u>	DATE	<u>02/02/2001</u>
TYPE OR PRINT NAME	<u>Roy L. Wheeler, Jr.</u>	TELEPHONE NO.	<u>915-758-6778</u>		

(This space for State Use)

APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		

ICSG

