

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Co.
P.O. Box 1980
Hobbs, NM 88241

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT - " for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☐ Oil Well ☐ Gas Well ☒ Other

2. Name of Operator
Amerada Hess Corporation

3. Address and Telephone No.
P.O. Drawer D, Monument, N.M. 88265 505-393-2144

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FNL & 660' FEL, Sec. 3, T20S R36E

5. Lease Designation and Serial No.

NM-1150

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

N. Monument G/SA Unit
Blk. 18

8. Well Name and No.

17

9. API Well No.

30-025-0417400

10. Field and Pool, or exploratory Area

Eunice Monument G/SA

11. County or Parish, State

Lea County

N.M.

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- | | |
|------------------------------------------------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| <input checked="" type="checkbox"/> Other <u>Press. test csg. & check bradenhead</u> | <input type="checkbox"/> Dispose Water |

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Plan to MIRU & press. test csg. to 500# for 30 min., check bradenhead for pressure and/or flow, & continue TA'd status on referenced well.

Call BLM 24 hours before RU.

14. I hereby certify that the foregoing is true and correct

Signed

Title Senior Production Foreman

Date 1/12/98

(This space for Federal or State office use)

Approved by

(ORIG. SGD.) DAVID R. GLASS

Title

PETROLEUM ENGINEER

Date

JAN 23 1998

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

* See Instruction on Reverse Side