

71-046164-A

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—" for such proposals.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

1. NAME OF OPERATOR

Amerada Hess Corporation

2. ADDRESS OF OPERATOR

Drawer D, Monument, New Mexico 88265

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FSL & 660' FWL

14. PERMIT NO.

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

3590' DF

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

H. W. Andrews

9. WELL NO.

13

10. FIELD AND POOL, OR WILDCAT

Eumont Yates Seven Rivers Queen

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 23, T20S, R36E.

12. COUNTY OR PARISH 13. STATE

Lea

N.M.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETION ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☒

ABANDON* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

REPAIR WELL ☐

CHANGE PLANN ☐

(Other) ☐

(Other) ☐

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Identify state of pertinent details, and give pertinent dates, including estimated date of starting and 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 knock bridge plug loose at 3520' & push to bottom, clean out to 3850' and acidize Eumont Yates Seven Rivers Queen zone thru 5-1/2" csg. perf. fr. 3740' to 3850' w/3000 gal. 15% acid, swab load, set pump unit and gas engine and resume production.

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

SIGNED

E. B. Fisher

TITLE

Supv. Adm. Ser.

DATE

9-26-84

(This space for Federal or State office use)

APPROVED BY

TITLE

ADMINISTRATIVE
CARRIED RESOURCE AREA

DATE

10-26-84

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side