Submit 3 Copies to Appropriate District Office

SIZE OF NEW MEXICO Fnergy, Minerals and Natural Resources Departmer

Form C-103

DISTRICT

OH CONSEDVATION DIVISION

Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION		WELL API NO.
DISTRICT II	P.O. Box 20		
P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico	87504-2088	3002505621 5. Indicate Type of Lease
DISTRICT III			STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.
SUNDRY NOTI	CES AND REPORTS ON WE	11.0	B-2330-10
I TO HOLLOSE THIS FORM FOR PRO	POSALS TO DRILL OR TO DEEDE	N OP BLUC BACK TO A	
אוויי בתבוזו חבסכה	RVOIR. USE "APPLICATION FOR PI 101) FOR SUCH PROPOSALS.)	ERMIT	7. Lease Name or Unit Agreement Name
1. Type of Well:	101) FOR SOCH PHOPOSALS.)		
OE WELL X WELL	OTHER		NORTH MONUMENT G/SA UNIT BLK. 3
2. Name of Operator AMERADA HESS CORPORATI	ON		8. Well No.
3. Address of Operator	UN		6
POST OFFICE DRAWER D. 4. Well Location	MONUMENT, NEW MEXICO	88265	9. Pool name or Wildcat EUNICE MONUMENT G/SA
Unit Letter F - 19	80 Feet From The NORTH	100	
	22 rea riom ine NON in	Line and1980	J Feet From The WEST Line
Section 17	Township 19S	ange 37E	NMPM LEA COURT
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)	County
II. Check	/////		
NOTICE OF INT	Appropriate Box to Indicate	Nature of Notice, Re	eport, or Other Data
	ENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING			- TO A MIND VIDATION (IN ENT
OTHER: CEMENT	Ţ0 b 🔀	CASING TEST AND CE	MENT JOB [_]
		OTHER:	
 Describe Proposed or Completed Operation SEE RULE 1103. 	oos (Clearly state all pertinent details, a	nd give pertinent dates, includ	ling estimated date of starting any proposed
NMGSAU #306			
Plan To			
Move in and rig up pull	ling unit. TOH with r	ods and pump. N	ipple down wellhead. Nipple
			tubing. Isolate and test ith tubing and packer. Rig rix cement across leaks
TOH with tubing and bit Clean and clear location		. Rig down and	move out pulling unit.
	_		
I hereby certify that the information shows in	/		
I bereby certify that the information above is true a	no complete to the best of my knowledge and	belief.	
SIGNATURE SIGNATURE	Harvey III	Sr. Staff As	ssistant DATE 02-01-94
TYPE OR PRINT NAME	Terry L. Harvey		TELEPHONE NO. 393-2144
(This space for State GINAL SIGNED B	V IFODY CENTON		
DISTRICT I SU	PERVISOR		From the the second or
APPROVED BY			FEB 0 9 1994
CONDITIONS OF APPROVAL, IF ANY:			- DAIS