Submit 3 Copies to Appropriate District Office

State of New Mexico y, Minerals and Natural Resources Departmen E

Form C-103

DISTRICT

OIL CONSERVATION DIVISION

Revised 1-1-89

| P.O. Box 1980, Hobbs, NM 88240 | WELL API NO. |
|--|--|
| DISTRICT II P.O. Drawer DD, Artesia, NM 88210 P.O. Drawer DD, Artesia, NM 88210 P.O. Box 2088 Santa Fe, New Mexico 8 | ' I |
| DISTRICT III | 5. Indicate Type of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | STATE X FEE |
| OUNDO | 6. State Oil & Gas Lease No. E-6506-1 |
| SUNDRY NOTICES AND REPORTS ON WELL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN O | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERA (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: | PR PLUG BACK TO A 7. Lease Name or Unit Agreement Name |
| Off. Off. | NORTH MONUMENT G7SA UNIT BLK. 2 |
| AMERADA HESS CORPORATION | 8. Well No. |
| 3. Address of Operator | 5 |
| POST OFFICE DRAWER D, MONUMENT, NEW MEXICO 8 4. Well Location | 9. Pool name or Wildcat EUNICE MONUMENT G/SA |
| Unit Letter E: 1980 Feet From The NORTH Line and 660 Feet From The WEST Line | |
| Section 18 Township 19S Range | 37F |
| 10. Elevation (Show whether DF | RKB, RT, GR, etc.) |
| 11. Check Appendicts Parks I. II. | |
| Check Appropriate Box to Indicate Na NOTICE OF INTENTION TO: | ture of Notice, Report, or Other Data |
| | SUBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK PLUG AND ABANDON . | REMEDIAL WORK ALTERING CASING |
| TEMPORARILY ABANDON CHANGE PLANS | |
| PULL OR ALTER CASING | - SOS AND ADMIDONMEN |
| OTHER: $C_{EM,TH}V = 0$ | CASING TEST AND CEMENT JOB |
| 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and g work) SEE RULE 1103. | ive pertinent dates including animals. |
| NMGSAU #205 | and proposed |
| Plan 75 | |
| Move in and rig up pulling unit. TOH with rods and pump. Nipple down wellhead. TOH with production tubing. Install new wellhead. Nipple up BOP. TIH with RBP on tubing and set at ±3.700'. Cap with 2 sacks of sand. TOW with 1.50 miles are considered. | |
| | |
| | |
| packer. Rig up cementers. TIH with tubing openended and spot micro-matrix cement across leaks (volume to be determined by interval height). TOH with tubing. TIH | |
| with packer and tubing and squeeze cement in 1 | oaks. Maximum and tubing. TIH |
| with packer and tubing and squeeze cement in leaks. Maximum squeeze pressure: 1,000 psi. Rig down dementers. Wait on cement for 48 hours. TOH with tubing and packer. | |
| | |
| | |
| down and move out pulling unit. Clean and cle | ar location. |
| I hereby certify that the information above is true and complete so the best of my knowledge and believe | |
| SKONATURE SKELL TITLE | C. CT-CC A |
| ma. | Sr. Staff Assistant DATE 02-01-94 |
| TYPE OR PRINT NAME Terry L. Harvey | |
| (This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON | |
| DISTRICT I SUPERVISOR | I The second of the |
| CONDITIONS OF APPROVAL, IF ANY: | DATE - FEB 216 1004 |