

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
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 <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	5. Lease Designation and Serial No. LC-034075
2. Name of Operator Amerada Hess Corporation	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 840, Seminole, TX 79360 915 758-6700	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FWL & 1980' FSL. Unit K, Sec. 18, T19S, R37E	8. Well Name and No. North Monument Well 11 G/SA Unit Blk. 2
	9. API Well No. 30-025-05636
	10. Field and Pool, or exploratory Area Eunice Monument G/SA
	11. County or Parish, State Lea N.M.

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

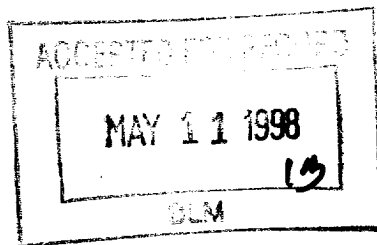
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<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 checked="" type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other 1st Water Injection.	<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.)*

4-21-98 Division Order No. R-9596 Admin. Order No. WFX-716

Began injecting water at rate of 1858 B.W./D. thru 64/64" choke. Tbg. press. 635 PSI & ✓
csg. press. 0 PSI. Open Hole fr. 3870' - 4017'.



RECEIVED
N.M. OIL CONSERVATION DIVISION
HOBBS, NM 88241
MAY 24 A 11:03

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

Signed [Signature] Title Admin. Svc. Coord. Date 4-22-98

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
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 Instruction on Reverse Side

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