. O. OF.ES RECEIVED	_		Form C-103
DISTRIBUTION			Supersedes Old C-102 and C-103
SANTA TE	NEW MEXICO OIL CON	SERVATION COMMISSION	Effective 1-1-65
FILE	4		
LAND OFFICE			Sa. Indicate Type of Lease
OPERATOR			State X Fee 5. State Oil & Gas Lease No.
to the total			B-1533-122
SUND!	RY NOTICES AND REPORTS ON COPOSALS TO COLUMN OR PLUG TICH FOR PERMIT LITTERAM COLOTIFICATION	IWELLS	MINIMINITARIO
USE "APPLICA	TICH FOR PERMIT LIP (FORM CI-101) FOR SU	CH PROPOSAUS.	
OIL GAS WELL	OTHER.		7. Unit Agreement Name
2. Name of Operator Amerada Hess Corporation			8. Form or Lease Name State "O"
3. Address of Cherator			9, Well No.
Drawer "D", Monument, New Mexico 88265			. 2
4. Lecation of Well			10. Field and Pool, or Wildcat
UNIT LETTER G	1980 FELT FROM THE North	LINE AND 1980 FEET FROM	Eunice-Monument (G/SA)
THE East LINE, SECT	30 TOWNSHIP 19	-S SANGE 37-E NMPN	
	15. Elevation (Show whether	DE, RT. GR, etc.)	12. County
		3634 DF	Lea
16. Check	Appropriate Box To Indicate N	Nature of Notice, Report or O	her Data
NOTICE OF !	NTENTION TO:		T REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING DANS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		OTHER Artificial Lit	t X
OTHER			
17. Describe Proposed or Completed O	perations (Clearly state all pertinent det	ails, and give pertinent dates, including	estimated date of starting any proposed
work) SEE RULE 1103,			
Sand pump sand off	Cast Iron Bridge Plug at	3835', knock bridge plu	g to TD, and
place well on artif	icial lift.		
		·	
		·	
16. I hereby certify that the information	n above is true and complete to the best o	of my knowledge and belief.	
16. I hereby certify that the information			
18. I hereby certify that the information		of my knowledge and betief. nin. Services Supyr.	DATE 3/26/76
16. I hereby certify that the information			
18. I hereby certify that the information signed Approved by			DATE 3/26/76