Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office		-		Revised	1107	
<u>DISTRICT I</u> P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATIO		WELL API NO.	00 005 05744		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	2040 Pacheco St. Santa Fe, NM 87505		5. Indicate Type	30-025-05744 of Lease		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & G		FEE	
SUNDRY NOTICES AND REPORTS ON WELLS			B-1533	-1/2 ///////////////////////////////////		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name NORTH MONUMENT G/SA UNIT			
1. Type of Well: OIL GAS WELL WELL WELL	GAS WELL OTHER WATER INJECTION			BLK 10		
Name of Operator Amerada Hess Corporation	on		8. Well No.			
3. Address of Operator P. O. Box 840 Seminole, TX 79360			9. Pool name or Wildcat EUNICE MONUMENT G/SA			
4. Well Location Unit Letter C : 660	Feet From The NORTH	Line and198	BO Feet Fro	om The WEST	Line	
Section 30	Township 19S Ra	nge 37E	NMPM	LEA .	County	
	10. Elevation (Show whether	775				
11. Check App	propriate Box to Indicate	Nature of Notice,	Report, or	Other Data		
NOTICE OF IN	TENTION TO:	SUB	SEQUENT	REPORT O	F:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING	, [
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS.	PLUG AND ABANDO	оимеит 🗆	
PULL OR ALTER CASING L	r1	CASING TEST AND CE				
OTHER:		OTHER:CONVER	RT TO WATER I	NJECTION	[<u>x</u>	
12. Describe Proposed or Completed Oper work) SEE RULE 1103.	ations (Clearly state all pertinent deta	ails, and give pertinent dat	es, including estim	nated date of starting a	any proposed	
04/22/1998 THRU 04/29/199	98 DIVISION ORDER R-9596	ADMIN ORDER NO. N	√FX-716			
	OH W/RODS & PUMP. REMOVED					
	FILL AT 3945'& TOH. TIH CSG. TO 580 PSI FOR 30 MI					
FRACMASTER ACIDIZED CSG.	PERFS. FR. 3804' - 3896' W	1/4600 GAL. 15% HCI	_ ACID. SWAE			
	1XS PKR. ON 2-3/8" POLYLIN PKR. FLUID. REMOVED BOP					
TESTED CSG. TO 620 PSI FC	OR 32 MIN. HELD OK. CHART JJECTION LINE INSTALLATION.	ATTACHED. RDPU 8	CLEANED LOC			
WELL CLUSED IN PENDING IN	DECITOR LINE INSTALLATION.	C-103 TO FULLOW	UN 151 INJEC	IIUN.		
I hereby certify that the information above is tru	e and complete to the best of my knowledge	and belief.				
SIGNATURE COLLA FORMISE	TITL	E STAFF ASSISTANT		DATE5-	1-98	
TYPE OR PRINT NAME COLLEEN ROBINS	ON			TELEPHONE NO. 915	758-6700	
(This space for State Use)	ED SY			ليو ورة ، مدد	` A``` 1	
APPROVED BY	4K	E		DATE DATE	1 3 Ç	
CONDITIONS OF APPROVAL, IF ANY:	THE			DATE		