## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy inerals and Natural Resources Department

Form C-103

DISTRICTI

Revised 1-1-59

P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION		WELL API NO.	
DISTRICT II	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		30-025-05793	
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease	<i></i>
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE	FEE X
			6. State Oil & Gas Lease No.	
SUNDRY NOT	ICES AND REPORTS ON WEI	LLS		7////////
( DO NOT USE THIS FORM FOR PRODIFFERENT RESERVA	RYCH. USE APPLICATION FOR PE	I OR PLUG BACK TO A	7. Lease Name or Unit Agreement Nam	<i>:::::::::::::::::::::::::::::::::::::</i>
1. Type of Well:	-101) FOR SUCH PROPOSALS.)			
OIL (AS WELL OTHER		NORTH MONUMENT G/SA UNIT		
2. Name of Operator			BLK. 16 8. Well No.	
AMERADA HESS CORPORA  3. Address of Operator	ATION		13	
POST OFFICE DRAWER D. MONIMENT NEW MEYICO GOOGE			9. Pool name or Wildcat	
T. Well Excelled			EUNICE MONUMENT G/SA	
Unit LetterM :	O Feet From The SOUTH	Line and660	Feet From The WEST	Line
Section 32	Township 195 R	ange 37E j		_
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)	VMPM LEA	County
II. Check	Annon minto Donat I II			
NOTICE OF INT	Appropriate Box to Indicate I	Nature of Notice, Re	port, or Other Data	
		SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASIN	ig 🗌
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS PLUG AND ABAN	DONMENT
PULL OR ALTER CASING CASING TEST AND C		<i>p</i>	20111112111	
OTHER: Intent to convert	to Injection Well. [X]	OTHER:		
12. Describe Proposed or Completed Operationski) SEE RULE 1103.	tions (Clearly state all pertinent details as	d aire a minut day in the		
		- gove pertonent dates, includ	ng eximaled date of starting any propose	d
NMGSAU #1613	22.4			
and nipple up ROP	ulling unit, reverse un	nit and air unit	. Nipple down wellhead	d
	TIH w/underreamer, driderreamer. Rig down a			
openhole with LDT/CN	L/GR tools. Add perfor	rations from 3,7	10'-3,720', 3,726'-3.76	ine 50'.
tubing to +/- 3.600'	load casing tubing	in umberger. []	H with treating packer	on
				dicallan
Solvent (using rock :	salt as diverting agent	as needed). Sv	vab/flow back load.	iiceiiar
coated injection tub	ing W/injection nackon	Ning. P	ick up and TIH $w/2 = 3/8$	
wellhead assembly. [	Rid down and move out p	oulling unit. Cl	lean and clear location	าท เ
			R-95	
I hereby certify that the information above is true	and complete to the best of my knowledge and	belief.	, (- (-)	<u>40</u>
SIGNATURE LEVY X	arvy m	. Staff As	sistant DATE /0-	24-94
TYPE OR FRINT NAME		and the second s	DATE	-1-17
	erry L. Harvey		TELEPHONE NO.	<u> 393-2144</u>
	TO BE A CONTROL OF TON		<b>007.0</b> 0.00	
	LA ESSANCIANOS	2	OCT 28 19	394
CONDITIONS OF APPROVAL, IF ANY:	BIL		DATE	