State of New Mexico

Submit 3 copies to Appropriate	Energ finerals and Nat	tural Resources Departme	Form C Revised March 25,			
District Office DISTRICT I	OH CONCEDU	ATION DIVISION				
1625 N. French Dr., Hobbs, NM 88240	·	ATION DIVISION	WELL API NO.			
DISTRICT II		h St. Francis Dr.	30-025-05899			
811 S. First, Artesia, NM 88210	Santa F	Fe, NM 87504	5. Indicate Type of Lease STATE FEE	✓		
DISTRICT III			6. State Oil / Gas Lease No.			
1000 Rio Brazos Rd., Aztec, NM 87410						
SUNDRY NO	OTICES AND REPORTS ON WELLS		The state of the s	140		
(DO NOT USE THIS FORM FOR PRO DIFFERENT RES (FO	7. Lease Name or Unit Agreement Name North Monument G/SA Unit Blk. 22					
1. Type of Well OIL WELL	GAS OTHER TA'd					
2. Name of Operator Amer	ada Hess Corporation		8. Well No.			
3. Address of Operator P.O.	9. Pool Name or Wildcat Eunice Monument G/SA					
Well Location     Unit Letter F	: 1980 Feet From The	North Line and 1980	Feet From The West Line			
Section 4 Township 20S Range 37E NMPM Lea COUNTY						
The Application of the Comment	10. Elevation (Show whether	er DF, RKB, RT,GR, etc.)	COLOR OF THE PERSON OF THE PER	*		
11. Chec	ck Appropriate Box to Ind	licate Nature of Notice, Re	eport, or Other Data			
NOTICE OF INTEN	BSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING			
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPE	COMMENCE DRILLING OPERATIONS PLUG AND ABANDONMENT			
PULL OR ALTER CASING		CASING TEST AND CEMEN	T JOB	_		
OTHER:			TA'd Well.	V		

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of 12. starting any proposed work) SEE RULE 1103.

5-16 thru 5-18-2001

MIRU Pool Well Svc. pulling unit. Removed wellhead & installed BOP. Jarrel Svc. TIH w/7" CIBP set at 3300' & capped w/15' cement, (5-17-2001). Circ. pkr. fluid & press. tested csg. to 570 PSI for 30 min. Held OK. Chart attached. Removed BOP & installed wellhead. RDPU, cleaned location & TA'd well.

Amerada Hess Corporation respectfully request a TA'd status on well for future NMGSAU operations.

			Abandonment Expire	$\frac{3/3000}{2}$
I hereby certify that the information above	e intrine and complete to the best of my	knowledge and belief.	Svc. Spec. II	DATE05/22/2001
TYPE OR PRINT NAME	Roy L. Wheeler, Jr.			TELEPHONE NO. 915-758-6778
(This space for State Use)		TIT! F	STATE OF THE SECOND	DATE

\_TITLE\_\_

APPROVED BY\_

CONDITIONS OF APPROVAL, IF ANY: