Submit 3 copies to Appropriate District Office	State of New Ene. <sub>3</sub> y, Minerals and Natural			Form C-10 levised 1-1-8	
DISTRICT I P.O. Box 1980, Hobbs, NM 88241 DISTRICT II	2040 Pacheco St.		WELL API NO. 30-025-05920		
P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, NM 87505		5. Indicate Type of Lease STATE	FEE 🗹		
DISTRICT III  1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil / Gas Lease No.		
SUNDRY NOTICES AND REPORTS ON WELLS				Note William Service	
(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 Blk. 21		
1. Type of Well OIL GAS OTHER Injection Well.					
Name of Operator     Amerada Hess Corporation			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 A	660 Feet From The No	orth Line and 660	Feet From The East Line		
Section 5			IPM LEA COUNT	Y	
11.	10. Elevation (Show whether DF, R	3361 GR		***	
starting any proposed work) SEE  11-14 thru 11-20-2000  MIRU Key Energy Svc. pulling u to 500 PSI for 30 min. Held OK.	PLUG AND ABANDON CHANGE PLANS  I Operations (Clearly state all pertinent RULE 1103.  Init. Removed wellhead, installed TIH w/ret. tool, latched onto, & Tested csg. to 550 PSI for 30 min.	REMEDIAL WORK  COMMENCE DRILLING OPER  CASING TEST AND CEMENT  OTHER:  t details, and give pertinent dat  BOP & TOH w/tbg. & pkr.  TOH w/RBP. TIH w/7* Loc-	ЈОВ 🗍	tested csg.	

I hereby certify that the information about is true and comblete with	best of my knowledge and belief.	
SIGNATURE Roy fill baller of	TITLE Bus. Svc. Spec. II	DATE
TYPE OR PRINT NAME Roy L. Wheele	, Jr.	TELEPHONE NO. 915-758-6778
(This space for State Use)		DATE DEC 2.9 70.00
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	DeSoto	

