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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

(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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
2. Name of Operator Amerada Division - Amerada Hess Corporation		8. Farm or Lease Name L.M. Lambert	
3. Address of Operator Box 591 - Midland, Texas 79701		9. Well No. 9	
4. Location of Well UNIT LETTER <u>H</u> <u>2214</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM THE <u>East</u> LINE, SECTION <u>6</u> TOWNSHIP <u>20 S</u> RANGE <u>37 E</u> N.M.P.M.		10. Field and Pool, or Wildcat Monument Paddock	
15. Elevation (Show whether DF, RT, GR, etc.) 3570' DF		12. County Lea	

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Acidized</u> <input checked="" type="checkbox"/>

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

2-5-70 - Acidized 5-1/2" Csg Perf. F/5188' to 5233' w/1000 gal 15% NE Acid & 150# Wide Range Unibeads. Reran production equipment and resumed pumping.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>L.B. Deely</u>	TITLE <u>Prod. Records Supervisor</u>	DATE <u>May 12, 1970</u>
APPROVED BY <u>[Signature]</u>	TITLE <u>SUPERVISOR DISTRICT</u>	DATE <u>MAY 15 1970</u>
CONDITIONS OF APPROVAL, IF ANY:		