

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> TA'd		5. LEASE DESIGNATION AND SERIAL NO. LC-031621-A
2. NAME OF OPERATOR AMERADA HESS CORPORATION		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR DRAWER D, MONUMENT, NEW MEXICO 88265		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  2310' FSL & 2279' FWL		8. FARM OR LEASE NAME BRITT "A"
14. PERMIT NO.		9. WELL NO. 5
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3573' DF		10. FIELD AND POOL, OR WILDCAT EUNICE-MONUMENT G/SA
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 6, T-20S, R-37E
		12. COUNTY OR PARISH LEA
		13. STATE NEW MEXICO

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐

MULTIPLE COMPLETION ☐

ABANDON\* ☐

CHANGE PLANS ☐

TEST CSG. ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other)

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

PLAN TO MIRU PULLING UNIT & INSTALL BOP. TIH W/BUMPER SUB, DC'S, & JARS TO FISH AT  $\pm$  3230'-3306'. ATTEMPT TO RECOVER TAC & TBG. & TOH. TIH W/4-3/4" BIT TO  $\pm$  3350' TOH. TIH W/5-1/2" CIBP SET AT  $\pm$  3350'. TIH W/5-1/2" PKR. & TEST CSG. FOR LEAKS. IF LEAKS DETECTED, SQUEEZE W/CLASS C NEAT CEMENT. WOC. TIH W/BIT, DRILL OUT & TEST CSG. TO 500# FOR 15 MIN. TIH W/TBG. TO  $\pm$  3350', CIRC. HOLE CLEAN W/TREATED WATER & RESUME TA'd STATUS.

RECEIVED  
APR 19 10 06 AM '91  
CARLSON  
AREA HEADQUARTERS

18. I hereby certify that the foregoing is true and correct

SIGNED

*R. C. Whelan Jr.*

TITLE SUPV. ADM. SVC.

DATE 4/17/91

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

4-26-91

\*See Instructions on Reverse Side