Submit 3 Copies to Appropriate
District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-8

DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980 DISTRICT II P.O. Drawer DD Artesia NM 88210 Santa Fe, New Mexico 87504-2088	WELL API NO.
DISTRICT II Santa Fo Nov. Marine 97504 2000	WELL API NO.
DO D- DO A	30-025-09884
1.0. Slawer DD, Altesia, IAM 00210	5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	STATE X FEE 6. State Oil & Gas Lease No.
	B-1167-48
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.)	7. Lease Name or Unit Agreement Name
1. Type of Well:	NORTH MONUMENT G/SA UNIT
OIL GAS WELL OTHER	BLK. 6
2. Name of Operator	8. Well No.
Amerada Hess Corporation 3. Address of Operator	9
P.O. DRAWER D, MONUMENT, NM 88265	9. Pool name or Wildcat EUNICE MONUMENT G/SA
4. Well Location Unit Letter I: 1980 Feet From The SOUTH Line and 66	-
Unit Letter I: 1980 Feet From The SOUTH Line and 66	Feet From The EAST Line
Section 20 Township 19S Range 37E	NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.	E.)
Check Appropriate Box to Indicate Nature of Notice,	Report or Other Date
	SSEQUENT REPORT OF:
	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	OPNS. DPLUG AND ABANDONMENT
PULL OR ALTER CASING L CASING TEST AND CE	MENT JOB
OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dat work) SEE RULE 1103.	tes, including estimated date of starting any proposed
WOTE) SEE ROLE 1103.	o o o o o o o o o o o o o o o o o o o
NMGSAU #609	
MIDII DIII LING UNIT O DEVEDE UNIT NO 144 TON 11 TO	
MIRU PULLING UNIT & REVERSE UNIT. ND WH. TOH & LAY DWN RODS & PUMP W/TBG. TIH W/BIT, D.C.'S & TBG. CLEAN OUT TO TD @ 3,984'. TOH W/E	P. ND WH. NU BOP. TOH
THE OTHER MYSONIC/CNE/GREEDULS. RD SCHLUMRERGER THE WYSONIC HAMMER	DON TOC TO TO DU ACTO
CO. ACIDIZE WELL W/O.UUU GALS. 15% NEFF DI HCL W/3% NP.77MY MICELLA	AD COLVENT TOU LIZEOUTE
HAMMER. TIH W/TBG. & PKR. SET PKR. @ +/-3,700'. SWAB/FLOW BACK LO LAYING DWN PROD. TBG. P.U. & TIH W/2-3/8" LINED INJ. TBG. W/INJ. PK	UND TUT INTER O DAD
ASSEMBLE. RUMO PULLING UNIT. CLEAN & CLEAR LOCATION. OBTAIN ST RO	CR. NU BUP. NU INJ. WH OTTOMHOLF PRESS REFORE
BEGINNING INJECTION.	OF THE STATE OF TH
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE SR. STAFF ASSIST	TANT DATE 02-21-96
TYPE OR PRINT NAME TERRY L. HARVEY	
TETALI E. IVANYELI	
(This space for State Use)	тецерноме мо. 505-393-2144
	TELEPHONE NO. 505-393-2144