

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-12471
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B-869-2
7. Lease Name or Unit Agreement Name	NORTH MONUMENT G/SA UNIT BLK. 14
8. Well No.	11
9. Pool name or Wildcat	EUNICE MONUMENT G/SA
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER WATER INJECTION WELL

2. Name of Operator

Amerada Hess Corporation

3. Address of Operator

P.O. DRAWER D, MONUMENT, NM 88265

4. Well Location

Unit Letter K : 1980 Feet From The SOUTH Line and 1980 Feet From The WEST Line

Section 36 Township 19S Range 36E NMPM LEA County

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: INITIAL WATER INJECTION OPERATIONS. ☒

12. 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.

NMGSAU #1411 OCTOBER 20, 1995

BEGAN INJECTING WATER AT A RATE OF 460 BWPD. CHOKE SET AT 1/64" AND TUBING PRESSURE - VACUUM.
ORDER NO. R-9596.

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

SIGNATURE

Terry L. Harvey

TITLE SR. STAFF ASSISTANT

DATE 02-15-96

TYPE OR PRINT NAME

TERRY L. HARVEY

TELEPHONE NO. 505-393-2144

(This space for State Use)

APPROVED BY

Orig. Signed by
Paul Kautz
Geologist

TITLE

DATE

FEB 22 1996

CONDITIONS OF APPROVAL, IF ANY: