COPIES RECEIVED		
TRIBUTION		
FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

5a. Indicate Type of Lease
State [X]   Fee [ ]

5. State Oil & Gas Lease No.
B-869

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 [ ]   GAS WELL [XX]   OTHER-

7. Unit Agreement Name

2. Name of Operator
Amerada Hess Corporation

8. Farm or Lease Name
State F

3. Address of Operator
Drawer "D" - Monument, New Mexico   88265

9. Well No.
5

4. Location of Well

UNIT LETTER __N__, __785__ FEET FROM THE __South__ LINE AND __1980__ FEET FROM

THE __West__ LINE, SECTION __36__ TOWNSHIP __19-S__ RANGE __36-E__ NMPM.

10. Field and Pool, or Wildcat
Monument McKee-Ellenbg

15. Elevation (Show whether DF, RT, GR, etc.)
3590' DF

12. County
Lea

16.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [ ]

TEMPORARILY ABANDON [ ]

PULL OR ALTER CASING [ ]

PLUG AND ABANDON [ ]

CHANGE PLANS [ ]

OTHER ____ [ ]

SUBSEQUENT REPORT OF:

REMEDIAL WORK [ ]

COMMENCE DRILLING OPNS. [ ]

CASING TEST AND CEMENT JOB [ ]

OTHER ____ **T. A.**

ALTERING CASING [ ]

PLUG AND ABANDONMENT [ ]

[XX]

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.

9-67:   Unable to establish production from McKee-Ellenburger zone, closed in and T. A.

7-68:   Set BP at 7800' w/one sack cement on top. McKee-Ellenburger zone P & A

Perforated Blinebry zone 5620' to 5712'. Treated w/acid. Nonproductive.
Squeezed perfs 5620' to 5712' w/150 sacks cement. Drilled cement and perfs
5691' to 5711'. Acidized w/1500 gals 15% NE. Tested nonproductive
Closed in and T. A. 7-6-68

Plan to reevaluate Blinebry and G-SA zones if nonproductive, plug and abandon

Work to be done in 3rd quarter, 1975

Expires 10/1/75

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

SIGNED _____   TITLE **Supvr. Admin. Services**   DATE **10-11-74**

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: