

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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.	30-025-31503
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	NORTH MONUMENT G/SA UNIT BLK. 16
8. Well No.	3
9. Pool name or Wildcat	EUNICE MONUMENT G/SA

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator AMERADA HESS CORPORATION
3. Address of Operator POST OFFICE DRAWER D, MONUMENT, NEW MEXICO 88265	4. Well Location Unit Letter <u>C</u> : <u>735</u> Feet From The <u>NORTH</u> Line and <u>1840</u> Feet From The <u>WEST</u> Line

Section <u>32</u>	Township <u>19S</u>	Range <u>37E</u>	NMPM	LEA	County
-------------------	---------------------	------------------	------	-----	--------

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
--

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER: Amended report fr. original of 10/24 <input checked="" type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>

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 #1603

Move in and rig up pulling unit. TOH with rods and pump. Nipple down wellhead. Nipple up BOP. TOH with tubing. TIH with a Sonic Hammer on tubing to TD. Rig up acid company. Acidize well with 5,000 gals. 15% NEFE DI HCL w/3% DP-77MX Micellar Solvent. TOH with Sonic Hammer. TIH with tubing and packer. Set packer at ±3,700'. Swab/flow back load. TOH with tubing and packer, laying down production tubing. Pick up and TIH w/2 3/8" coated injection tubing with injection packer. Nipple down BOP. Nipple up injection wellhead assembly. Rig down and move out pulling unit. Clean and clear location.

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 11-03-94

TYPE OR PRINT NAME Terry L. Harvey TELEPHONE NO. 393-2144

(This space for State Use)

ORIGINAL SIGNED BY  
GARY WINK  
FIELD REP. II

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

NOV 14 1994