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 88240	OIL CONSERVATION P.O. Box 208		WELL API NO.	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210  Santa Fe, New Mexico 87504-2088		30-025-32358 5. Indicate Type of Lease		
DISTRICT III			STATE X FEE	]
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	
			B-1368	_
SUNDRY NOTICES AND REPORTS ON WELLS  ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			<u> </u>	
DIFFERENT RESERVO	R. USE "APPLICATION FOR PE ) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name  J.R. PHILLIPS GAS COM	
1. Type of Well:			J.R. FRILLIPS GAS COM	İ
OR GAS WELL X	OTHER			
2. Name of Operator		- 12.	8. Well No.	$\neg$
AMERADA HESS CORPORATIO	N ATTN: KEN WHITE		4	
3. Address of Operator			9. Pool asme or Wildcat	
1201 LOUISIANA, STE 700	, HOUSTON, TEXAS 77	002	EUMONT YATES SRQ	$\dashv$
Unit Letter 0 : 1090	Feet From The SOUTH	Line and13	30 Feet From The <u>FAST</u> L	ine
Section 1	Township 20S Ra	inge 36E	NMPM LEA County	.
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)	V/////////////////////////////////////	77
	/// <u>/</u>			
11. Check App	propriate Box to Indicate	Nature of Notice, Re	eport, or Other Data	
NOTICE OF INTER	ITION TO:	SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERIAL CARIAGO	
		REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING			OPNS. LI PLUG AND ABANDONMENT	
PULL OR ALTER CASING CASING TEST AND CE			MENT JOB X	
OTHER:				П
<ol> <li>Describe Proposed or Completed Operations work) SEE RULE 1103.</li> </ol>	(Clearly state all pertinent details, as	nd give pertinent dates, inclu	ling estimated date of starting any proposed	
SET 425' OF <u>8-5/8"</u> 24#	J55 8RS ERW R3 "A" S	URFACE CASING.		
PUMP 150 SX CLASS "C" C	EMENT. BUMP PLUG W/	600 PSI. TEST	CSG. TO 1000 PSI FOR 30 MINUT	ES.
WELD OF				
HELD OK.				
I hereby certify that the information above is true and	complete to the heat of my transplates and	helief	<del></del>	—
SIGNATURE WAS	т	LE SUPVSR. DR		
TYPE OR PRINT NAME KEN WHIT	'E		(713) TELEPHONE NO. 752–544.	5
KIIII		····		=
(This space for State Use)	GNED BY JERRY SEXTON			
DISTA	CRED BY JERRY SEXTON  CCT   SUPERVISOR	1¢	PARE IAN 1 9 1994	