Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

SEP 23 1996

_ DATE _

District Office	Energy, Minerals and Natural R	esources Department	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			30 - 025 - 33551 5. Indicate Type of Lease
DISTRICT III			STATE FEE X
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. N/A
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: OIL WELL X GAS WELL	OTHER		W.A. WEIR
2. Name of Operator Amerada Hess Corporation	nn		8. Well No. 10
3. Address of Operator			9. Pool name or Wildcat
P.O. Box 2040, Houston, 4. Well Location			MONUMENT/ABO
Unit Letter D : 330	Feet From The NORTH	Line and 66	Feet From The WEST Line
Section 35		inge 36E	NMPM LEA County
	10. Elevation (Show whether	er DF, RKB, RT, GR, etc. 3648' GR.	c.)
11. Check Ap	propriate Box to Indicate		Report, or Other Data
NOTICE OF I	NTENTION TO:	SUE	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING		CASING TEST AND CE	
OTHER:		OTHER: RUNNING	
12. Describe Proposed or Completed Opwork) SEE RULE 1103.	erations (Clearly state all pertinent det	ails, and give pertinent da	tes, including estimated date of starting any proposed
SET @ 7550', TURBOLIZERS 100 SX. CLAS W/177 BBLS (PSI. BUMP PL BOMB AND INF	. SHOE @ 7548', F.C. @ 7 & 47 CENTRALIZERS. CMT SS "H" + 5% HALAD 9 + 1 (10 BBLS F. WATER & 167 LUG W/800 PSI @ 5:00 P.N	7467'. CSG. PAC . WITH HOWCO. P /4#/SX. C.F. (1 BBLS. MUD) @ 1 M. RETURNS THR	2" 15.50#,K55,8RL,SMLS,R3,"A" CS KER @ 7084'-7081'. RAN 62 UMP 50 BBLS MUD FLUSH. CMT. WITH 5.6#,1.25) + 6#/SX SALT. DISPLAC 0 BBLS MIN. FINAL CIRC. WITH 30 U-OUT JOB. RECIPROCATE CSG. DROP E TOOL & CIRC. 5-1/2" CSG. CIRC.
09-14-96: CMT. 2ND STA	AGE. PUMP 200 BBLS. OF	TREATED BRINE W	ATER. MIX & PUMP 900 SX. CLASS "
	(CONTI	NUED ON NEXT PA	GE)
I hereby certify that the information above is	true and complete to the best of my knowledge	e and belief.	
SIGNATURE MCCOUNTY	TIT	LE <u>ADM. SUPERVIS</u>	SOR DRILLING DATE 09-17-96
TYPE OR PRINT NAME MIKE JUMPER			TELEPHONE NO. 713 609 - 4846
(This space for State Use)			

APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL CONTROL ON ANDLY SENTON

