Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

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		TION D	'VISION F			
O. Box 1980, Hobbs NM 88240 P.O. Box 2088 ISTRICT II Santa Fe, New Mexico 87504-2088			WELL API NO. 30 - 025 - 33567			
P.O. Drawer DD, Artesia, NM 88210	Saita 1 5, 110W 1	violated cyclo.		5. Indicate Type of	STATE	FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410				6. State Oil & Gas		
	CES AND REPORTS ON					
(FORM C-	POSALS TO DRILL OR TO DE RVOIR. USE "APPLICATION F 101) FOR SUCH PROPOSAL	OR PERMIT"	3 BACK TO A	7. Lease Name or W.A. WEIR	Unit Agreement Nam	e
1. Type of Well: OIL WELL X GAS WELL	OTHER					
2. Name of Operator Amerada Hess Corporatio	n			8. Well No. 11		
3. Address of Operator				9. Pool name or V		
P.O. Box 2040, Houston,	TX 77252-2040			MONUMENT	/ABO	
4. Well Location Unit Letter E: 1680	D Feet From The N	ORTH 1	Line and 58	Feet From	n The WEST	Line
Section 35	Township 19S	Range w whether DF, 1	RKB, RT, GR, etc.	NMPM .)	LEA	County
Charle Ar	propriate Box to Ind		25 GR.	Donort or (Y/////////////////////////////////////	
	propriate box to inc	ncate Matu	-	-	REPORT O	F:
NOTICE OF III	TENTION 10.		332			_
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMI	EDIAL WORK		ALTERING CASING	i L
TEMPORARILY ABANDON	CHANGE PLANS	∐ сом	MENCE DRILLING	OPNS.	PLUG AND ABAND	ONMENT L
PULL OR ALTER CASING		CASI	NG TEST AND CE	MENT JOB X		
OTHER:		отн	R: RUNNING	PRODUCTION	CASING	
12. Describe Proposed or Completed Opework) SEE RULE 1103.	erations (Clearly state all pert	inent details, an	d give pertinent dat	tes, including estim	ated date of starting	any proposed
"A" CSG. SE , AND USED 6 FLUSH, 130 S DISPLACED W/ W/1000 PSI A AND INFLATE SX OF CMT TO CLASS "C" 50	GERS CSG. CREW ANI T AT 7,520', SHOE 2 TURBOLIZERS AND X. CLASS "H" + 6#. 187 BBLS. MUD AT TT 11:30 A.M. GOO! PACKER W/300-2000 PIT. CMT. 2ND S 0/50 POZ + 8#/SX S. 5% HALAD 9 + 1/5	AT 7,518 42 CENTRA /SX SALT - 8 BBLS/M D RETURNS PSI. OPI TAGE. PUI ALT + 1/4	, FC AT 7,4 ALIZERS. CI L.5% HALAD IN. FINAL (THRU-OUT JO EN STAGE TOO MP 200 BBLS SX C.F. (437' CSG. MT. W/HOWCO 9 + 1/4#/S CIRC. W/500 OB-RECIPROC OL. CIRC. TREATED BR 14.1#,1.38)	PACKER AT 6, . PUMP 50 B X. C.F. (15 PSI. BUMP ATE CSG. DR 5-1/2" CSG. INE WATER.	998'-6,9 BLS OF M .6# 1.25 PLUG OP BOMB CIRC. 2 725 SX.
I hereby certify that the information above is SIGNATURE TYPE OR PRINT NAME MIKE JUMPER	yer			ORILLING SV:	DATE 10-24	
(This space for State Use)						