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	OIL CONSERVATION	ON DIVISION	
P.O. Box 1980, Hobbs NM 88240 DISTRICT II	P.O. Box 2088		WELL API NO. 30 - 025 - 33671
P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexic	0 87504-2088	5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE X  6. State Oil & Gas Lease No.
	ICES AND DEDODES ON ME	1.0	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:	10171 GIT GOGITT NOF GSALS.)		W.A. WEIR "B"
OIL GAS WELL	OTHER		
2. Name of Operator	_		8. Well No.
Amerada Hess Corporatio  3. Address of Operator			9. Pool name or Wildcat
P.O. Box 2040, Houston, 4. Well Location			MONUMENT/ABO
Unit Letter F : 2310 Feet From The NORTH Line and 1650 Feet From The WEST Line			
Section 26	Township 19S R	ange 36E	NMPM I FA County
	10. Elevation (Show wheth	er DF, RKB, RT, GR, etc.	NMPM LEA County
11. Check App	propriate Roy to Indicate	3676' GR.	Barrell Milling
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF			
		308	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON L	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CEN	
OTHER: DEVIATE TO SIDETRAC	K JUNK X	OTHER:	
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.			
12-29-96: SET A CEMENT KICK-OFF PLUG W/ HOWCO BY PUMPING 150 SX. OF CLASS 'C' CEMENT			
+ 1% CFR-3 (17.5# .93) FROM 5520' TO 5120' TO DEVIATE IN AN INDETERMINATE DIRECTION TO SIDETRACK JUNK IN THE HOLE.			
The field.			
I hereby certify that the information above is true	and complete to the best of my knowledge:	and helief	
SIGNATURE TITLE ADM. SUPERVISOR DRIG. SVS. DATE 12-30-96			
TYPE OR PRINT NAMEMIKE JUMPER			
(This space for State Use)	ML SIGNED BY		TELEPHONE NO.713-609-4846
<b>€</b> }.			JAN 09 1997
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	Congr. II Title		DATE