

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

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.  
30-025-33696

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.  
N/A

7. Lease Name or Unit Agreement Name  
W.A. WEIR

8. Well No.  
13

9. Pool name or Wildcat  
MONUMENT/ABO

| SUNDRY NOTICES AND REPORTS ON WELLS<br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"<br>(FORM C-101) FOR SUCH PROPOSALS.)          |  |
|---|--|
| 1. Type of Well:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER  |  |
| 2. Name of Operator<br>Amerada Hess Corporation   |  |
| 3. Address of Operator<br>P.O. Box 2040, Houston, TX 77252-2040   |  |
| 4. Well Location<br>Unit Letter <u>C</u> : <u>330</u> Feet From The <u>NORTH</u> Line and <u>1650</u> Feet From The <u>WEST</u> Line<br>Section <u>35</u> Township <u>19S</u> Range <u>36E</u> NMPM <u>LEA</u> County |  |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>3639' GR.   |  |

| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data |   |
|---|---|
| NOTICE OF INTENTION TO:   | SUBSEQUENT REPORT OF:   |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                                | REMEDIAL WORK <input type="checkbox"/>                                      |
| TEMPORARILY ABANDON <input type="checkbox"/>                                  | ALTERING CASING <input type="checkbox"/>                                    |
| PULL OR ALTER CASING <input type="checkbox"/>                                 | COMMENCE DRILLING OPNS. <input type="checkbox"/>                            |
| OTHER: <input type="checkbox"/>   | PLUG AND ABANDONMENT <input type="checkbox"/>                               |
|   | CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>              |
|   | OTHER: <u>RUNNING PRODUCTION CASING</u> <input checked="" type="checkbox"/> |

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.

12-12-96: DISPLACE W/ 165 BBLS FRESH WATER @ 8.5 BBLS/MIN. FINAL CIRC. W/ 1800 PSI. BUMP PLUG & CLOSE STAGE TOOL W/ 3550 PSI @ 12:00 AM. MST. GOOD RETURNS THRU-OUT JOB.  
12-13-96: N.U. TBG. HEAD- KN LA3 11" 3Mx7-11/16" 3M, TEST W/ 3000PSI-OK. RELEASE RIG. TURNED OVER TO PRODUCTION.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Mike Jumper TITLE ADM. SUPERVISOR DRILG. SVS. DATE 12-16-96  
TYPE OR PRINT NAME MIKE JUMPER TELEPHONE NO. 713-609-4846

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: