

NEW MEXICO OIL CONSERVATION COMMISSION

COPIES RECEIVED		
TRIBUTION		
FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease  
State ☐ Fee ☒  
5. State Oil & Gas Lease No.

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.)

1. CIL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- 2. Name of Operator Amerada Hess Corporation	7. Unit Agreement Name
3. Address of Operator Drawer "D", Monument, New Mexico 88265	8. Farm or Lease Name J.G. Hare
4. Location of Well UNIT LETTER K 1980 FEET FROM THE West LINE AND 1980 FEET FROM THE South LINE, SECTION 33 TOWNSHIP 21-S RANGE 37-E NMPM.	9. Well No. 5
10. Field and Pool, or Wildcat Blinebry	
15. Elevation (Show whether DF, RT, GR, etc.) 3456' DF	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

17. 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.

Plan to run Neutron Lifetime and Cement bond logs. Set bridge plug at approx. 5420' with cement on top. Block squeeze if necessary. Perforate Paddock zone as indicated by logs from approx. 5155' to 5276'. Acidize and frac Paddock perforations. Swab test. Run production equipment and restore well to producing status from Paddock zone.

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

SIGNED [Signature] TITLE Supver., Admin. Services DATE 3-8-74

APPROVED BY Joe D. [Signature] TITLE Est. [Signature] DATE   
CONDITIONS OF APPROVAL, IF ANY: