

District I - (505) 393-6161
1625 N. French Dr
Hobbs, NM 88240
District II - (505) 748-1283
1301 W. Grand Avenue
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 476-3440
1220 S. St. Francis Dr.
Santa Fe, NM 87505

New Mexico
Energy Minerals and Natural Resources Department

Form C-139
Revised 06/99

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505
(505) 476-3440

**SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE**

H-0686

APPLICATION FOR PRODUCTION RESTORATION PROJECT

I. Operator and Well:

Operator name & address Amerada Hess Corporation P. O. Drawer D, Monument, New Mexico 88265							OGRID Number 000495	
Contact Party Jay Baker							Phone 505 393-2144	
Property Name Fred Turner Jr. "C"					Well Number 1	API Number 30-025-07782		
UL E	Section 17	Township 20S	Range 38E	Feet From The 1980	North/South Line North	Feet From The 660	East/West Line West	County Lea

II. Pool and Production Restoration:

Previous Producing Pool(s) (If change in Pools): Warren McKee (Previously Warren McKee Unit Well No. 121)	
Date Production Restoration started: 05/28/2002	Date Well Returned to Production: 06/21/2002
Describe the process used to return the well to production (Attach additional information if necessary): Please refer attached copy C-103.	

III. Identify the period and Division records which show the Well had thirty (30) days or less production for the twenty-four consecutive months prior to restoring production:

Records Showing Well produced less than 30 days during 24 month period: <input type="checkbox"/> Well file record showing that well was plugged <input type="checkbox"/> ONGARD production data <input checked="" type="checkbox"/> OCD Form C-115 (Operator's Monthly Report)		Month/Year (Beginning of 24 month period): 06/1970
		Month/Year (End of 24 month period): 06/21/2002

IV. Affidavit:

State of New Mexico)
) ss.
County of Lea)
Jay Baker, being first duly sworn, upon oath states:
1. I am the Operator, or authorized representative of the Operator, of the above referenced Well.
2. I have personal knowledge of the facts contained in this Application.
3. To the best of my knowledge, this application is complete and correct.
Signature Jay Baker Title Senior Production Foreman Date 6/21/02
SUBSCRIBED AND SWORN TO before me this 29 day of October, 2002.
Notary Public A. L. Whittle Jr.
My Commission expires: 03/15/05

FOR OIL CONSERVATION DIVISION USE ONLY:

V. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Production Restoration Project. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that production was restored on: 6/21/02

Signature District Supervisor <u>[Signature]</u>	OCD District <u>1</u>	Date <u>11/4/02</u>
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VI. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT:

DISTRICT I

P.O. Box 1980, Hobbs, NM 88241

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-07782
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil / Gas Lease No.
7. Lease Name or Unit Agreement Name Fred Turner Jr. "C"
8. Well No. 1
9. Pool Name or Wildcat West Nadine Paddock-Blinebry

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. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Amerada Hess Corporation
3. Address of Operator P.O. Box 840, Seminole, TX 79360
4. Well Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>17</u> Township <u>20S</u> Range <u>38E</u> NMPM <u>Lea</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3571' DF

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"/>	COMMENCE DRILLING OPERATIONS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: _____	OTHER: _____
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	Recompletion. <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.

5-28 thru 6-21-2002

MIRU Key Energy Svc. pulling unit. Removed wellhead, installed BOP & TIH w/6-5/8" plr. testing at intervals & located csg. leak fr. 4495' - 4794'. Halliburton Svc. pumped 60 sks. Premium Plus cement into csg. leak. WOC. TIH w/5-5/8" bit, tagged TOC at 4455' & drld. out cement at 4830'. Circ. clean & press. tested csg. to 560 PSI for 30 min. 06/03/02. Held OK. Chart attached. Schlumberger TIH w/4" csg. gun & perf. 6-5/8" csg. in Blinebry Zone w/3 SPF, total 45 holes, at following intervals: 5941'-5944', 6036'-6039', 6126'-6128', 6253'-6257', & fr. 6332'-6335'. B.J. Svc. acidized Blinebry Zone perms. w/4000 gal. 15% HCL acid. B.J. Svc. frac'd Blinebry Zone perms. fr. 5941'-6335' w/100,800 gal. Spectrafrac 35# XL Borate & 250,000# 16/30 sand. TIH w/5-5/8" bit & cleaned out fill. TIH w/6-5/8" x 2-7/8" 1 XS plr. on 2-7/8" tbg. & set plr. at 5891'. Removed BOP & installed wellhead. RDPU & cleaned location. Swabbed well & well began flowing 6-21-2002.

Test of 7-2-2002: Flowed 42 B.O./D., 65 B.W./D., & 373 MCFGPD in 24 hrs. on 2" FO Choke. Tbg. Press. 95 PSI & Csg. Press. 0 PSI.

Changed Well Name/Number from Warren McKee Unit Well No. 121.

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

SIGNATURE Roy L. Wheeler, Jr. TITLE Bus. Svc. Spec. II DATE 07/22/2002

TYPE OR PRINT NAME Roy L. Wheeler, Jr. TELEPHONE NO. 915-758-6778

(This space for State Use)

APPROVED BY _____ TITLE _____ ORIGINAL SIGNED BY _____ DATE JUL 25 2002

CONDITIONS OF APPROVAL, IF ANY:

PAUL F. KAUTZ
PETROLEUM ENGINEER

