.o. or copies weterven				Supersedes Old		
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION			C-102 and C-103	C-102 and C-103	
FILE		.AICO OIL CONSE	KTATION COMMISSION	Effective 1-1-65		
U.S.G.S.				5a. Indicate Type of I	ease	
LAND OFFICE				State X	Fee.	
OPERATOR				5. State Oil & Gas Le NM A-14		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO BRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)						
1. OIL . GAS .		- ·		7. Unit Agreement No	ime	
WELL X WELL 2. Name of Operator	OTHER- C	ompletion		8. Farm or Lease Nar	me	
Amerada Hess Corporation				State "Q"		
P.O. Box 2040, Tulsa, Oklahoma 74102				9. Well No.		
4, Location of Well		10. Field and Pool, or Wildcat				
UNIT LETTER,		N THE South	LINE AND FEE	Ilonument - P	addock	
THE East LINE, S	SECTION 16 T	COWNSHIP 205		NMPM.		
mmmm		tion (Show whether D		12. County	444444	
	1)	Gr. 3543		Lea Lea		
16. Che	ck Appropriate Box	To Indicate Na	ture of Notice, Report	or Other Data		
NOTICE O	F INTENTION TO:		SUBSEC	QUENT REPORT OF:		
				1		
PERFORM REMEDIAL WORK	PLUG	AND ABANDON	COMMENCE DRILLING OPNS.	ALTERING	ABANDONMENT	
PULL OR ALTER CASING	CHAP	NGE PLANS	CASING TEST AND CEMENT JOB			
			OTHER Completio	n		
OTHER						
17. Describe Proposed or Complete	ed Operations (Clearly sta	ite all pertinent detai	ils, and give pertinent dates, in	cluding estimated date of start	ing any proposed	
work) SEE RULE 1103.						
5,250' TD by dril	ler; 5,256 TD 1	by loggers				
Western Co. perfo fire casing gun W 15% NE acid, swab hole with work st at 5089', run bot	rated 5" liner ! 1/ 5/8" l jet sho bed well back, : ring, TIH with 2 tom hole pump ar	5182-5188, 52 ot per ft., I rec. 52 bbls. 2-3/8" tbg. s nd sucker roo	Sundry Notice dat dout float equipt. 200-5213' 10/7/75 will lowell acidized per new oil and load string with anchor ds, clamped well of ting a pumping unit	th 3" hollow carrifs. $10/7/75$ with 1 water $10/8/75$, triat5023 and seating f @ 3 PM $10/9/75$ a	er selecti 500 gals. p out of nipple nd release	
			·			
18. I hereby certify that the inform	ation above is true and co	mplete to the best of	my knowledge and belief.			
SIGNED E. SIMAL	<u> </u>	TITLE Supe	ervisor Tech/Drlg.	/.dm. Serw 10/1	0/75	
() () () () () () () () () ()	aned by			:		
APPROVED BY	TOSO	TITLE		oatstâl le) 13/5	
CONDITIONS OF APPROVAL, IF	gist:					