

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. 30-025-04541
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 H.L. HOUSTON GAS COM
8. Well No. 3
9. Pool name or Wildcat EUMONT-QUEEN GAS

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator AMERADA HESS CORPORATION	
3. Address of Operator DRAWER D, MONUMENT, NM 88265	
4. Well Location Unit Letter <u>B</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>EAST</u> Line Section <u>7</u> Township <u>21S</u> Range <u>36E</u> NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. 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"/>	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 type="checkbox"/>
	OTHER: <input 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.

MOVE IN AND RIG UP PULLING UNIT, PULL RODS AND PUMP. INSTALL BOP AND TREE ASSEMBLY AND LAY BLOW DOWN LINES TO PIT. PULL TUBING AND TIH W/OVERSHOT, JARS, BUMPER SUB AND 6 DC'S ON WORKSTRING. ATTEMPT TO JAR FISH AT 3532' FROM HOLE AND TOH WITH FISH. TIH WITH NOTCHED COLLAR ON BOTTOM OF WORKSTRING AND TAG FOR FILL. AIR DRILL OUT ANY FILL TO $\pm 3629'$ IF NECESSARY. DETERMINE NEED TO RETURN WELL TO PUMPING, FLOWING OR PLUNGER LIFT SYSTEM.

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

SIGNATURE Cindy Robertson TITLE SR. ADMIN. STAFF ASSIST. DATE 10/5/93
TYPE OR PRINT NAME CINDY ROBERTSON TELEPHONE NO. 393-2144

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE OCT 13 1993

CONDITIONS OF APPROVAL, IF ANY: