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OPERATOR		

# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

<b>SUNDY NOTICES AND REPORTS ON WELLS</b> <small>(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.)</small>		5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
		5. State Oil & Gas Lease No. E-394
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Amerada Hess Corporation		8. Farm or Lease Name State WE"A"
3. Address of Operator Drawer "D" Monument, New Mexico 88265		9. Well No. 1
4. Location of Well UNIT LETTER <u>F</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>12</u> TOWNSHIP <u>21-S</u> RANGE <u>35-E</u> NMPM.		10. Field and Pool, or Wildcat Eumont-Yates-7 R-Q
15. Elevation (Show whether DF, RT, GR, etc.)		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 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 JOB <input type="checkbox"/>	OTHER <u>T. A.</u> <input checked="" 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.

Pulled production equipment  
Closed all valves and T. A. 2-71  
Plan to retest and if nonproductive, plug and abandon  
Work to be done in 3rd quarter, 1975

*Expires 10/1/75*

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNED <u>[Signature]</u>	TITLE <u>Supvr. Admin. Services</u>	DATE <u>10-11-74</u>	
APPROVED BY <u>Joe D. Ramsey</u> Dist. 1, Supr.	TITLE _____	DATE <u>OCT 25 1974</u>	
CONDITIONS OF APPROVAL, IF ANY:			