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NEW MEXICO OIL CONSERVATION COMMISSION

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

SEP 1 0 1969

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-1640
7. Unit Agreement Name
8. Farm or Lease Name State WE "L" Com.
9. Well No. 1
10. Field and Pool, or Wildcat Undesignated
12. County Lea

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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- Drilling
2. Name of Operator Amerada Hess Corporation
3. Address of Operator P. O. Box 1920 - Hobbs, New Mexico 88240
4. Location of Well UNIT LETTER K 1780 FEET FROM THE west LINE AND 1980 FEET FROM THE south LINE, SECTION 10 TOWNSHIP 21-S RANGE 35-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3608' DF 3594' GL

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☒
CASING TEST AND CEMENT JOB ☒
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Spudded 17-1/2" hole at 3:15 p.m. 8-31-69. Drilled to TD of 350'. Ran 8 jts. 13-3/8" OD csg. set at 347'. Cemented with 400 sacks Class "C" cement with 2% calcium chloride. Pumped plug to 300'. Cement circulated. Plug down at 1:00 a.m. with 300# maximum pressure. Waited 20-3/4 hrs. Tested 13-3/8" csg. with 1000#, for 1/2 hr., held OK. Started drilling 12-1/4" hole.

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

SIGNED *[Signature]* TITLE District Superintendent DATE September 9, 1969
APPROVED BY *[Signature]* TITLE SUPERVISOR DATE SEP 11 1969
CONDITIONS OF APPROVAL, IF ANY: