

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

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.)		WELL API NO. 30-025-26550	
1. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER ☐		5. Indicate Type of Lease STATE ☒ FEE ☐	
2. Name of Operator AMERADA HESS CORPORATION		6. State Oil & Gas Lease No. E-394	
3. Address of Operator DRAWER D, MONUMENT, NM 88265		7. Lease Name or Unit Agreement Name STATE WE "A"	
4. Well Location Unit Letter F : 1800 Feet From The NORTH Line and 1980 Feet From The WEST Line Section 12 Township 21S Range 35E NMPM LEA County		8. Well No. 4	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)		9. Pool name or Wildcat EUMONT YATES 7RQ	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER: ☐	CASING TEST AND CEMENT JOB ☐	OTHER: DEEPEN WELL ☒

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.

2-2-94 THRU 2-8-94

MIRU DA&S WELL SER. PULLING UNIT. TIH WITH PLUG & SET IN F NIPPLE. INSTALLED BOP & TOH WITH TUBING. TIH WITH 4-3/4" BIT. RU TRI-CONE AIR DRLG. EQUIPMENT & TAGGED TD AT 3,459'. DRILLED FORMATION FR. 3,459' TO 3,619'. BLEW WELLBORE CLEAN & TOH WITH BIT. TIH WITH NOTCHED CPLG. ON 2-3/8' TBG. SET AT 3,598'. REMOVED BOP & INSTALLED WELLHEAD. RDPU, CLEANED LOCATION & RESUMED FLOWING TO SALES.

TEST OF 2-15-94: FLOWED 136 MCFGPD IN 24 HOURS.

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 2/28/94
TYPE OR PRINT NAME CINDY ROBERTSON

TELEPHONE NO. 393-2144

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE 2-28-1994
CONDITIONS OF APPROVAL, IF ANY:

Orig. Signed by
Paul Kanto
Geologist