Submit 3 Copies to Appropriate District Office

2. Name of Operator

PULL OR ALTER CASING

Submit 3 Copies	State of New Mexico	Form C-103
o Appropriate District Office	Energy Ainerals and Natural Resources Department	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088	WELL API NO. 30-025-10274 5. Indicate Type of Lease
DISTRICT III 0000 Rio Brizzos Rd., Aziec, NM 87410		STATE FEE X 6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PRI DIFFERENT RESEI	ICES AND REPORTS ON WELLS OPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A RVOIR. USE "APPLICATION FOR PERMIT" 101) FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name E.W. WALDEN
OF ART OYS	OTHER	
L Name of Operator AMERADA HESS CORPORATION Address of Operator	DN	8. Well No. 6
DRAWER D. MONUMENT, NM	1 88265	9. Pool name or Wildcat DRINKARD & TUBB
Unit Letter M :73	S1 Feet From The SOUTH Line and 7	31 Feet From The WEST Line
Section 15	Township 22S Range 37E [[[]] 10. Elevation (Show whether DF, RKB, RT, GR, etc.)	NMPM LEA County

CASING TEST AND CEMENT JOB

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. 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

3406' DF

OTHER: SURFACE COMMINGLE GAS PRODUCTION X OTHER: 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. PLAN TO MIRU PU. RIG UP WIRELINE EQUIPMENT & RUN TUBING STOP IN 2" BUTTRESS TBG.

WELLHEAD & INSTALL TREE ASSEMBLY. RELEASE PKR. & TOH W/TBG. & PKR. TIH W/REPAIRED OR REPLACEMENT PRODUCTION PKR., SN W/RUPTURE DISK IN PLACE ON 2" TBG. TO ± 6228'. HYDROSTATIC TEST TUBING GOING IN THE HOLE TO 5000# & SET PKR. REMOVE TREE ASSEMBLY. INSTALL WELLHEAD. TIH W/WT. BAR & RUPTURE DISC. & RETURN WELL TO PRODUCTION. SURFACE COMMINGLE GAS PRODUCTION FR. DRINKARD & TUBB ZONES.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. SUPV. ADM. SVC. SIGNATURE 5-20-93 (505) TYPE OR PRINT NAME WHEELER, JR. TELEPHONE NO. 393-2144 (This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON

Bistiner: Grade 4008

MAY 27 1993

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY

OCD HOBPS OFFICE

1 24 2 6 1983

RECEIVED