

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. <u>10296</u> <u>30-025-10270</u>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator AMERADA HESS CORPORATION
3. Address of Operator DRAWER D, MONUMENT, NEW MEXICO 88265	8. Well No. 1
4. Well Location Unit Letter <u>K</u> : <u>1909</u> Feet From The <u>SOUTH</u> Line and <u>1909</u> Feet From The <u>WEST</u> Line Section <u>15</u> Township <u>22S</u> Range <u>37E</u> NMPM LEA County	9. Pool name or Wildcat BRUNSON ELLENBURGER

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3402' DF
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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.

PLAN TO MIRU PU. PULL RODS, PUMP AND INSTALL BOP. TOH WITH 2-3/8" TUBING AND TIH WITH RBP AND PKR. SET RBP ABOVE PERFS. AT $\pm 7700'$. TEST FOR CASING LEAK. SQUEEZE CASING LEAK AS REQUIRED. TIH WITH 4-3/4" BIT ON 6 - 3-1/2" DRILL COLLARS ON 2-3/8" TUBING. RIG UP REVERSE UNIT AND DRILL OUT CEMENT. TEST SQUEEZE JOB AND RE-SQUEEZE IF NECESSARY. TOH. TIH WITH PRODUCTION EQUIPMENT AND RETURN TO PRODUCTION.

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 ADDIST. DATE 1/23/91
TYPE OR PRINT NAME CINDY ROBERTSON TELEPHONE NO. 505 393-2144

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: