

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240DISTRICT II
P.O. Drawer DD, Artesia, NM 88210DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-10392
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name E. WOOD
8. Well No. 7
9. Pool name or Wildcat DRINKARD/TUBB
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3360' DF

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER
2. Name of Operator AMERADA HESS CORPORATION
3. Address of Operator DRAWER D, MONUMENT, NM 88265
4. Well Location Unit Letter A : 732 Feet From The NORTH Line and 641 Feet From The EAST Line Section 22 Township 22S Range 37E NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3360' DF

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
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.

MIRU PU AND INSTALL BOP. IF NECESSARY KILL WELL AND TOH WITH 2-3/8" TUBING. TIH ON WIRELINE WITH GAUGE RING AND JUNK BASKET TO $\pm 5800'$. TOH. TIH WITH RBP AND SET $\pm 5700'$. TIH WITH PKR. ON TUBING AND TEST RBP TO 2000#. TEST CSG. TO 500# AND TOH. TIH WITH PERF GUN AND PERF CSG. BETWEEN 2758' AND 3192' WITH 4 HOLES. TOH. TIH WITH PACKER AND TUBING. ESTABLISH RATE AND PRESSURE INTO ZONE AND TRY TO ESTABLISH CIRC. TOH. TIH WITH RETAINER ON TUBING. ESTABLISH RATE AND PRESSURE. SQUEEZE LEAKS AS NECESSARY. RIG UP REVERSE EQUIPMENT AND TIH WITH BIT, DC'S AND TUBING. DRILL OUT AND TEST SQUEEZE. CIRCULATE SAND OFF RBP. PULL RBP AND TIH WITH PRODUCTION EQUIPMENT. 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 ASSIST. DATE 11-2-93
(505)
TYPE OR PRINT NAME CINDY ROBERTSON TELEPHONE NO. 393-2144

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISORAPPROVED BY _____ TITLE _____ DATE NOV 17 1993

CONDITIONS OF APPROVAL, IF ANY:

THE
OFFICE
OF THE
ATTORNEY GENERAL
OF THE STATE OF NEW YORK
ALBANY, N. Y.