

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

<p>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.)</p>		
<p>1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>Injection Well</u></p>		<p>7. Unit Agreement Name <u>Langlie Mattix Woolworth Unit</u></p>
<p>2. Name of Operator <u>Amerada Hess Corporation</u></p>		<p>8. Farm or Lease Name</p>
<p>3. Address of Operator <u>Drawer D, Monument, New Mexico 88265</u></p>		<p>9. Well No. <u>802</u></p>
<p>4. Location of Well UNIT LETTER <u>F</u> <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM THE <u>West</u> LINE, SECTION <u>33</u> TOWNSHIP <u>24S</u> RANGE <u>37E</u> N.M.P.M.</p>		<p>10. Field and Pool, or Wildcat <u>Langlie Mattix SR QuGB</u></p>
<p>15. Elevation (Show whether DF, RT, GR, etc.) <u>3253' GR</u></p>		<p>12. County <u>Lea</u></p>

<p>16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data</p>			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>TA'd</u> <input checked="" type="checkbox"/>

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.

12-14-88

Bradenhead
Closed all valves & TA'd well. Last ~~pressure~~ test conducted 10-11-88.

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

SIGNED R. Sexton *SW5* TITLE Supv. Adm. Svc. DATE 12-20-88

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE DEC 23 1988
TA submitted 12-20-89

RECEIVED

DEC 22 1988

**OCD
HOBBS OFFICE**