

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 12-1-78

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

<p align="center">SUNDRY NOTICES AND REPORTS ON WELLS</p> <p align="center"><small>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)</small></p>		
OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>Injection Well</u>		7. Unit Agreement Name <u>Langlie Mattix</u> <u>Woolworth Unit</u>
6. Name of Operator <u>Amerada Hess Corporation</u>		8. Farm or Lease Name
9. Address of Operator <u>Drawer D, Monument, New Mexico 88265</u>		9. Well No. <u>113</u>
10. Location of Well UNIT LETTER <u>P</u> <u>330</u> FEET FROM THE <u>East</u> LINE AND <u>660</u> FEET FROM THE <u>South</u> LINE, SECTION <u>33</u> TOWNSHIP <u>24S</u> RANGE <u>37E</u> NMPM.		10. Field and Pool, or Wildcat <u>Langlie Mattix-SR-QW GR</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3191' GR</u>		12. County <u>Lea</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
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

Closed all valves & TA'd well, Last ^{bradenhead} ~~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 <u>R. L. Whelan</u> ^{SW}	TITLE <u>Supr. Adm. Svc.</u>	DATE <u>12-20-88</u>	
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT 1 SUPERVISOR		DATE <u>DEC 23 1988</u>	
APPROVED BY _____	TITLE _____	DATE _____	
CONDITIONS OF APPROVAL IF ANY <u>TA'd well</u> 12-2-89			

RECEIVED

DEC 22 1988

**OCD
HOBBS OFFICE**