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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

<p align="center">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>5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/></p>
<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- 2. Name of Operator Amerada Hess Corporation 3. Address of Operator Drawer "D", Monument, New Mexico 88265 4. Location of Well UNIT LETTER I 990 FEET FROM THE East LINE AND 1650 FEET FROM THE South LINE, SECTION 34 TOWNSHIP 24-S RANGE 37-E NMPM.</p>		<p>5. State Oil & Gas Lease No. 7. Unit Agreement Name Langlie Mattix Woolworth Unit 8. Farm or Lease Name 9. Well No. 152 10. Field and Pool, or Wildcat Langlie Mattix</p>
<p>15. Elevation (Show whether DF, RT, GR, etc.)</p>		<p>12. County Lea</p>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER **Run Production Equipment** ☒
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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 1703.

Replaced tubing head. Ran 109 jts. 2-7/8" OD tubing set at 3430'.

Ran rods and pump. Set pumping equipment and started well pumping.

18 Hrs. Pumped 20 BO & 30 BW on 16-64" SPM.

Producing status changed from T.A. to Pumping oil well effective 11-1-72.

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

SIGNED *MD Black*

TITLE Supvr., Admin. Services.

DATE 11-2-72

Orig. Signed by
John Rung
Geologist

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NOV 6 1972

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17 5 1972

OIL CONSERVATION COMM.
HOODES, W. M.