

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. <i>30-015-32122</i>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <i>NM-12211</i>
7. Lease Name or Unit Agreement Name <i>Oxy T-Bone Fed</i>
8. Well Number <i>#1</i>
9. OGRID Number <i>175260</i>
10. Pool name or Wildcat <i>SWD; San Andres 9612</i>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 ☐ Gas Well ☒ Other *SWD* SEP 23 2005

2. Name of Operator
Judah Oil *OOD-ARTESIA*

3. Address of Operator
P.O. Box 568 Artesia NM 88211-0568

4. Well Location
Unit Letter *C* : *660* feet from the *North* line and *1980* feet from the *West* line
Section *23* Township *18-S* Range *31-E* NMPM County *Eddy*

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. 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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <i>MIT Test</i> <input checked="" type="checkbox"/>	

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

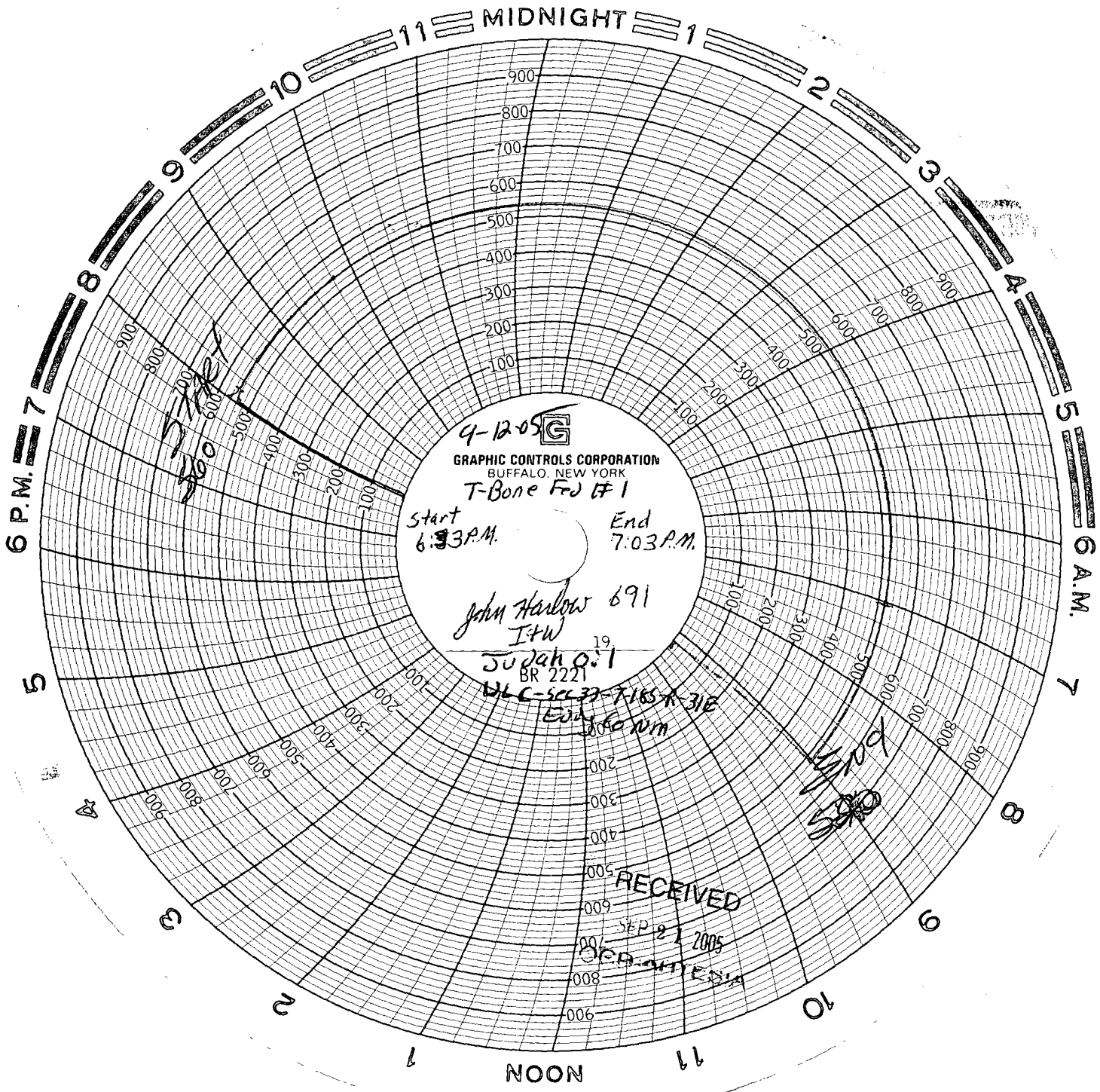
9-12-05 Notified OOD-Artesia office of Tbg leak
9-12-05 Notified OOD-Artesia office of MIT Test for 9-13-05
9-13-05 Pulled Tbg and found 1 bad joint.
Replaced joint w 1-2 7/8 PC
Circ packer fluid.
Set 5 1/2 X 2 7/8 17-20 ASI-X Nickleplated Packer @ 3950
Ran MIT Test - no witness
chart attach.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE *James B Campanella* TITLE *owner* DATE *9-26-05*
Type or print name *James B Campanella* E-mail address: *judaho.1@yahoo.com* Telephone No. *505-746-1280*
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____

Accepted for record - NMOCID



4-12-05

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
T-Bone Fry #1

Start
6:33 P.M.

End
7:03 P.M.

John Harlow 691
ITW

50 Jan 0.1
BR 2221

WLC-50077-715-A-31E
End 600 NM

RECEIVED

SEP 21 2005

OPD-ATL-ESL