Submit 1 Copy To A Office	1 Copy To Appropriate District		State of New Mexico		Form C-103		
Pionical (575) 202 4141 Energy Minerals and Natural Resources					Revised August 1, 2011		
1625 N. French Dr., Hobbs, NM 88240					WELL API NO.		
811 S. First St. Artesia, NM 88210 OIL CONSERVATION DIVISION					30-015-24989		
District III - (505) 334-6178 JUN 26 2013 1220 South St. Francis Dr.					5. Indicate Type of Lease STATE X FEE		
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460  1220 S. St. Francis Dr., Santa Fe, NM  87505  Santa Fe, NM 87505					6. State Oil & Ga		
1220 S. St. Francis I 87505	Dr., Santa Fe, NM		,		0. 544.0 01. 62 01	is Bouse 110.	
	SUNDRY NOTIC					r Unit Agreement Name	
(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					Red Twelve State	<b>;</b>	
PROPOSALS.)					9 W-11 N 002		
1. Type of Well: Oil Well X Gas Well  Other					8. Well Number 003		
Name of Operator     State of New Mexico formerly Marks and Garner					9. OGRID Number 14070		
3. Address of Operator					10. Pool name or Wildcat		
811 S. First Street Artesia, NM 88210					Cave GB SA		
4. Well Locatio	n						
Unit Le	tterI:	_2310feet fro	om the South	line and	330 feet from	n theEastline	
Section 5 Township 17S Range 29E NMPM Eddy County							
				RKB, RT, GR, etc.)			
		·					
PERFORM REM TEMPORARILY PULL OR ALTEI DOWNHOLE CO OTHER: 13. Describe of startin proposed 4/30/2013	NOTICE OF INT MEDIAL WORK ABANDON ABANDON PRICE Proposed or completion or recommendation of recommendation and worked to the Unseated pump and 2301'.	TENTION TO: PLUG AND ABAI CHANGE PLANS MULTIPLE COMI Sted operations. (0 k). SEE RULE 19 mpletion.  o unseat the pump	NDON	REMEDIAL WORK COMMENCE DRII CASING/CEMENT OTHER: Detrinent details, and C. For Multiple Condition d tally OOH with to	SEQUENT RE  LING OPNS.  JOB  Give pertinent date  pletions: Attach was	PORT OF: ALTERING CASING DEPAND A X  P AND A X  es, including estimated date wellbore diagram of	
	Circulated mud and cement to surface with					OH to 405' and circulated	
k i		•	*e				
I hereby certify th	at the information ab	ove is true and as	mnlete to the be	et of my knowledge	and heliaf	<u>-</u>	
Thereby certify th	at the information at	ove is true and co	implete to the be	st of my knowledge	and benef.		
SIGNATURE		•	TITI E			ATE	
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Type or print nam			E-mail address:	:	PH	IONE:	
For State Use Or APPROVED B <b>y</b> :			TITLE /	t mo	,	T6-26-2013	
Conditions of App			_111LE	7.110/	DA	IE US WID	