

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, 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

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

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-005-62324
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Tipton Oil & Gas Acquisitions, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 1234, Lovington, NM 88260		7. Lease Name or Unit Agreement Name: Marlisue Queen Unit
4. Well Location Unit Letter K , 2480 feet from the SOUTH line and 2285 feet from the WEST line Section 24 Township 14S Range 29E NMPM Chaves, County		8. Well No. 004Z
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. Pool name or Wildcat Double L Queen, Assoc.

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: RETURN TO PRODUCTION ☒

12. 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 recompilation.

RECEIVED

MAY 12 2006

OCU-MEDIA

4/1/06

Returned to Production.

24-hr. Test: 2 BO 40 BW

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

SIGNATURE Debbie McKelvey TITLE Agent, For Clay Tipton (President), Principal DATE 5/1/06

Type or print name Debbie McKelvey Telephone No. 505-392-3575

(This space for State use)

APPROVED BY FOR RECORDS ONLY TITLE DATE MAY 12 2006
Conditions of approval, if any: