

Submit 2 Copies To Appropriate District  
Office  
District I  
1625 S. ... Dr., Hobbs, NM 88240  
District II  
811 ... 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  
Revised March 25, 1999

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

WELL API NO.
30-005-61199
5. Indicate Type of Lease
STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name:
J P WHITE
8. Well No.
3
9. Pool name or Wildcat
Racetrack San Andres

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-104) FOR SUCH  
PROPOSALS.)

1. Type of Well:

Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator

Tipton Oil & Gas Acquisitions

3. Address of Operator

P.O. Box 1234, Lovington, NM 88260

4. Well Location

Unit Letter P : 660 feet from the South line and 660 feet from the East line

Section 18 Township 10S Range 28E NMPM Chaves, County

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

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 recompletion.

Repair tank. Returned to production 8/31/06.

24-hr test: 0.25 BO, 0 BW

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

SIGNATURE Dublin McKelvey TITLE Agent, For Jack Stevenson, Foreman DATE 12/6/06

Type or print name Jack Stevenson Telephone No. 505-631-1149

(This space for State use)

APPROVED BY Accepted for record - NMOCD TITLE  DATE 12/7/06  
Conditions of approval, if any: