

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. 3001504342
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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.)		7. Lease Name or Unit Agreement Name GRAYBURG JACKSON UNIT 8
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		8. Well Number
2. Name of Operator ASHER ENTERPRISES LTD CO		9. OGRID Number 149538
3. Address of Operator PO BOX 423 12808 Lorseu Way OCD-ARTESIA		10. Pool name or Wildcat GRAYBURG J.S.A.
4. Well Location Unit Letter L : 1980 feet from the 1980 S line and 660 feet from the W line Section 26 Township 17S Range 30E NMPM County EDDY		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
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 checked="" 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: <input 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.

PA PROCEDURE

1-23-08 TAG UP HARD @ 3127 FT SPOT 30 SACKS
1-24-08 RIH AND TAG @ 2927 FT CIRCULATE PLUGGING MUD RIH AND PERF @ 1291 FT RIH WITH PACKER AND PUMP
40 SACKS POH - HOLD PRESSURE ON PLUG
1-25-08 RIH AND TAG @ 1180 FT - POH - RIH AND PERFED @ 650 FT PUMP 40 SACKS - WOC - RIH - NO TAG- RESPOT 25 SACKS WOC
1-28-08 RIH AND TAG 510 FT POH - RIH AND PERF @ 154 FT PUMP 40 SACKS - NO CIRCULATION - WOC - RIH AND TAG @ 150 FT - SPOT 50 SACKS
1-29-08 RIH NAD TAG @ 151 FT - BREAK CIRCULATION - PUMP 60 SACKS WITH LCM WOC - RIH AND TAG @ 100 FT POH TO 60 FT - CIRCULATE 15 SACKS TO SURFACE - CUTOFF WELLHEAD AND ANCHORS, INSTALL DRY HOLE MARKER

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 NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Kelly Jones TITLE agent DATE 3-10-08

Type or print name
For State Use Only

E-mail address:

Telephone No.

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

Accepted for record
NMOCD PI

FLORENCE WEN