

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

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

Form C-103
Revised May 08, 2003

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. 30-015-33053
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Perenco LLC		6. State Oil & Gas Lease No. 33040
3. Address of Operator 6 Desta Drive, Suite 6800 Midland, TX 79705		7. Lease Name or Unit Agreement Name State 1724
4. Well Location Unit Letter N : 660 feet from the South line and 1980 feet from the West line Section 31 Township 17S Range 24E NMPM County Eddy		8. Well Number 311
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3861' GR		9. OGRID Number 218885
10. Pool name or Wildcat Wildcat Abo		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input checked="" 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.

01/12/04 Ran 98 jts of 7# 26# K-55 8rd LT&C csg. Set at 4977'. 12 centralizers run.
Cement as follows: Pump 10 bbls FW spacer ahead. Follow w/ 317 sx (134 bbl slurry @ 11.9 PPG) (50:50-10)
POZ Class "C" + 5% BWOW sodium chloride + 10% BWOC bentonite and tail w/ 170 sx (40 bbl slurry @ 14.8
ppg) Class "C" + 0.8% FL62 0.5% CD32 + 2% SMS. Displaced w/ 187 bbls FW. Had full returns during job.
Bump plug w/ 1480 psi @ 1659 hrs 01/12/04. Plug held.

Cement bond log will be run to determine top of cement and casing test performed prior to beginning completion operations.

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

SIGNATURE Robin S. McCarley TITLE Eng. Tech. DATE 1/22/04

Type or print name Robin S. McCarley Telephone No. (432) 682-8553

(This space for State use)

APPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any:

FOR RECORDS ONLY

JAN 29 2004