Submit I Copy To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 October 13, 2009
District I 1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVAT	ION DIVISION	30-005-20323
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE FEDERAL X
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NI	M 87505	6. State Oil & Gas Lease No. 308697
87505	CES AND REPORTS ON WI	ELLS	7. Lease Name or 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			DOUBLE L QUEEN UNIT
	as Well Other		8. Well Number 003J
2. Name of Operator Canyon E&P Company			9. OGRID Number 269864
3. Address of Operator 911 Lake Carolyn Pkwy, Suite 104 Irving, TX 75039			10. Pool name or Wildcat DOUBLE L
4. Well Location			
Unit Letter M 330 fe	et from the <u>SOUTH</u>	line and 330 fee	t from the <u>WEST</u> line
Section 31	Township 14S	Range 30E	NMPM CHAVES County
	11. Elevation (Show whether 3854' GL	r DR, RKB, RT, GR, etc.	
12 Check A	ppropriate Box to Indica	te Nature of Notice	Report or Other Data
•			•
NOTICE OF INT			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK TEMPORARILY ABANDON	PLUG AND ABANDON CHANGE PLANS	REMEDIAL WOR	RK X ALTERING CASING ☐ ILLING OPNS.☐ P AND A ☐
TEMPORARILY ABANDON L	MULTIPLE COMPL	CASING/CEMEN	
DOWNHOLE COMMINGLE	MOETIFEE COMFE	CAGINO/CLIVILIN	1 300
OTHER:		OTHER:	
13. Describe proposed or comple	eted operations. (Clearly state	e all pertinent details, an	d give pertinent dates, including estimated date mpletions: Attach wellbore diagram of
proposed completion or reco		MAC. For Multiple Co	impletions. Attach wendore diagram of
	•		
12-17-10	REPAIRED WELL AND E	LECTRICAL SYSTEM	AND RETURNED TO PRODUCTION.
			RECEIVED
			DEC 27 2010
			1
			NMOCD ARTESIA
pud Date:	Rig Releas	se Date:	
			
hereby certify that the information al	pove is true and complete to t	he best of my knowledg	e and belief.
IGNATURE	TITLE_	President	DATE <u>12-21-10</u>
ype or print name <u>J. Michael Myers</u> or State Use Only	E-mail ad	dress: <u>mike@canyone</u>	p.com PHONE: <u>972-869-8005</u>
epted for record my	d Wrong TITLE &	cield supervi.	COS DATE 12-28-10
ond Approval (if any):	11120	· EIU DUP EIVI.	Mit

Ook