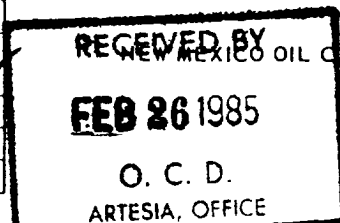


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SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
OPERATOR	<input checked="" type="checkbox"/>



Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-4-65

5a. Indicate Type of Lease  
State ☐ Fee ☒

5. 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- Re-Entry	7. Unit Agreement Name
2. Name of Operator Chama Petroleum Company <input checked="" type="checkbox"/>	8. Farm or Lease Name Ivey Com.
3. Address of Operator P.O. Box 31405, Dallas, Texas 75231	9. Well No. 1
4. Location of Well UNIT LETTER H 1980 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 5 TOWNSHIP 19S RANGE 26E NMPM.	10. Field and Pool, or Wildcat Wildcat-Penn
15. Elevation (Show whether DF, RT, GR, etc.) 3368.7' GL	12. County Eddy

### Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

#### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

OTHER Activity ☒

#### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

OTHER ☐

17. 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.

2/8/85: Checked tubing-casing annulus and vented small amount of gas to relieve pressure.  
Checked 4 1/2 x 8 5/8 annulus & found no pressure.

2/9/85: Laid out surface production equipment arrangement and repaired temporary fencing.

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

SIGNED Leslie A. Clements TITLE President

DATE 2/11/85

APPROVED BY Leslie A. Clements

CONDITIONS OF APPROVAL, IF ANY: Supervisor District II

DATE FEB 27 1985