

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

| |
|---|
| WELL API NO. 30-043-20895 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. NM-7765, NM-56298 |
| 7. Lease Name or Unit Agreement Name San Isidro (Shallow) |
| 8. Well No. 2 |
| 9. Pool name or Wildcat Mancos |

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 2. Name of Operator Energy Development Corporation | 3. Address of Operator 1000 Louisiana, Ste. 2900, Houston, TX 77002 |
| 4. Well Location Unit Letter <u>B</u> : <u>475</u> Feet From The <u>North</u> Line and <u>1750</u> Feet From The <u>East</u> Line Section <u>5</u> Township <u>20N</u> Range <u>2W</u> NMMPM <u>Sandoval</u> County <u></u> | | |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6936' RKB | | |

11. 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"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | | CASING TEST AND CEMENT JOB <input type="checkbox"/> | |
| OTHER: <input type="checkbox"/> | | OTHER: Relocated pump <input checked="" type="checkbox"/> | |

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.

Moved pump and end of tbg from 4,393' MD to 4,861' MD on March 8, 1994, to increase oil production.

RECEIVED
MAR 11 1994
OIL CON. DIV.
DIST. 3

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

SIGNATURE Paul E. Schwing TITLE Reg. & Environ. Aff. Engr DATE 3-9-94
TYPE OR PRINT NAME Paul E. Schwing TELEPHONE NO.

(This space for State Use)

Original Signed by CHARLES GHOLSON

APPROVED BY TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE MAR 11 1994

CONDITIONS OF APPROVAL, IF ANY: