

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

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

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

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

WELL API NO. 30-025-24991
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. LG 071A
7. Lease Name or Unit Agreement Name YATES STATE
8. Well No. 2
9. Pool name or Wildcat SANDHILLS GR- SA

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 GAS WELL OTHER

2. Name of Operator
MTRAGE ENERGY INC.

3. Address of Operator
7915 N. LLEWELYN, HOBBS, NM 88240

4. Well Location
Unit Letter M : 990 Feet From The SOUTH Line and 330 Feet From The WEST Line
Section 32 Township 20S Range 39E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3565.5 DF

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 checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: _____ <input 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.

TD 4355, PBD 4344 PERFS 4309-4314
 11/28/95 MIRU PULL AND LAY DOWN RODS, INSTALL BOP, PULL AND TALLY TUBING, RUN 4 1/2 BIT AND SCRAPER TO 4255', PULL OUT, SHUT DOWN.
 11/29/95 RUN 4 1/2 C.I.B.P., SET AT 4255', SPOT 10 SACKS CMT FROM 4225' - 4075', PULL TUBING, RUN PKR, TEST CASING, HOLE AT 350' SD.
 11/30/95 RIH W/TBG TO 4000', CIRCULATE MUD, LAY DOWN TUBING, PUMP 75 SX CMT, SD.
 12/01/95 PUMP INTO CASING 300 LBS., RUN TBG TAG CMT, PLUG NOT THERE, PUMP 75 SACKS DOWN CASING, DISPLACED TO 200', S., SD.
 12/02/95 TEST CSG 500 LBS, OK, TAG CMT AT 200', CIRCULATE CMT TO SURFACE, SI, SD.
 12/04/95 CHECK WELLHEAD, CMT TO SURFACE INSIDE AND OUT, INSTALL MARKER, RDCL.

CMT CLASS "C" MUD - 25 LB. SALT GEL PER BBL.

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

SIGNATURE [Signature] TITLE OPERATION COORDINATOR DATE 12/16/95
 TYPE OR PRINT NAME JAMES D. COGBURN TELEPHONE NO. (505) 392-7095

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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310 Old Santa Fe Trail, Room 206
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WELL API NO.
30-025-24991

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.
LG-0718

7. Lease Name or Unit Agreement Name
YATES STATE

8. Well No. 2

9. Pool name or Wildcat
SANDHILLS GB SA

SUNDRY NOTICES AND REPORTS ON WELLS
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DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
MIRAGE ENERGY INC.

3. Address of Operator
P.O. BOX 551, LOVINGTON, N.M. 88260

4. Well Location
Unit Letter M : 990 Feet From The SOUTH Line and 330 Feet From The WEST Line
Section 32 Township 20S Range 39E NMPM LEA County

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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: REPAIR CSG LEAK <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
TD, 4355, PRD 4344, PERFS 4309-4319

11-29-94 LOCATED HOLE IN 4 1/2" CSG @ 380' FROM SURFACE, PUMPED 150 SX CMT FROM 380' TO SURFACE UP 4 1/2" AND A 5/8" CSG, DIRC 15 SX TO PIT, DRILL OUT AND RETURN TO PRODUCTION.

WITNESSED BY JERRY SEXTON AND GARY WINK (NMOC)

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE [Signature] TITLE OPERATION COORDINATOR DATE 1-2-95
TYPE OR PRINT NAME JAMES D. COGBURN TELEPHONE NO. 505-392-7095

(This space for State Use)
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: