

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

Form C-103
May 27, 2004

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

WELL API NO. 30 015 01351
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. 8743
7. Lease Name or Unit Agreement Name Jenny #2
8. Well Number #2
9. OGRID Number 9259
10. Pool name or Wildcat Red Oak CB

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
H. Dwane Parrish Jr

3. Address of Operator
1304 S. 5th Artesia NM 88210

4. Well Location
Unit Letter I : 1980 feet from the FSL line and 660 feet from the FEL line
Section 11 Township 17S Range 28E NMPM County Eddy

11. Elevation (Show whether DR, RKR, RT, GR, etc.)

12. Check Appropriate Box to Indicate Status of Section: Remain or Other Data

13. Check Appropriate Box to Indicate Status of Section: Remain or Other Data

PERFORM WORK ON WELL	PLUG AND ABANDON	WILDCAT	ALTERED RESERVOIR
TEMPORARILY ABANDON	CHANGE PLANS	COMPLETION/REWORKING OF WELL	RE-ABANDON
PERMANENTLY ALTER CANNING	ALTER CANNING	COMPLETION/REWORKING OF WELL	RE-ABANDON

14. Describe the work to be completed on the well. If the well is to be plugged and abandoned, describe the method to be used. If the well is to be completed or reworked, describe the method to be used. If the well is to be altered, describe the method to be used. If the well is to be re-abandoned, describe the method to be used.

Run 1800' tubing pump minimum 25x cement plug - tags
Fill casing with mud
* Perforate/Squeeze 100' plug @ 484' to 584'
Run 400' tubing fill to surface with cement
Install meter
Perforate/Squeeze
Open Location

Case 14164
Parrish, H. Dwane & Rhonda K.
OCD Exhibit No. 20

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank free vent will be constructed or closed according to NMOCDD guidelines ☐ a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE owner DATE 2/4/05

Type or print name Gerry Guye Address [Address] Telephone No. [Phone]

APPROVED BY [Signature] TITLE Gerry Guye Compliance Officer DATE FEB 18 2008

Conductor of Approval (if any)