

Submit 1 Copy To Appropriate
District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM
88240
District II - (575) 748-1283
811 S. First St., Artesia, NM
88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM
87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe,
NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

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

Form C-103
Revised July 18, 2013

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"/>	7. Lease Name or Unit Agreement Name E. O. CARSON
2. Name of Operator Stephens & Johnson Operating Co.	8. Well Number 27
3. Address of Operator P O Box 2249, Wichita Falls, TX 76307-2249	9. OGRID Number 019958
4. Well Location Unit Letter <u>F</u> : <u>2050'</u> feet from the <u>North</u> line and <u>1553'</u> feet from the <u>West</u> line Section <u>33</u> Township <u>21S</u> Range <u>37E</u> NMPM County <u>Lea</u>	10. Pool name or Wildcat TUBB OIL AND GAS (OIL) 60240
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3456.6' GR	

12. 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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: RECLASS WELL <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

The GOR for this well is below 50,000 and we request that the well be reclassified from a Gas well to and Oil well in accordance With the Special Pool rules. Changing pools from TUBB OIL & GAS (PRO GAS) 86440 to TUBB OIL AND GAS (OIL) 60240

RECLASS EFFECTIVE 2/1/18

Spud Date:

Rig Release Date:

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

SIGNATURE Bob Gilmore TITLE VICE PRES. DATE 1-31-18

Type or print name BOB GILMORE E-mail address: bgilmore@sjoc.net PHONE: 940-723-2166
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 02/01/18
Conditions of Approval (if any):