

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.	30-015-34963
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	MONTURA FED COM
8. Well Number	002
9. OGRID Number	11181
10. Pool name or Wildcat	HAPPY VALLEY (MORROW) 78060

**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  
 THOMPSON, J. CLEO

3. Address of Operator  
 P.O. BOX 12577  
 ODESSA, TX 79768-2577

4. Well Location  
 Unit Letter P : 1091.5 feet from the SOUTH line and 994 feet from the EAST line  
 Section 15 Township 22S Range 26E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3317

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

SPUD WELL ON OCTOBER 11, 2006.  
 10-14-06 RUN 13 3/8 CASING

Casing Report: Run 12 joints 13 3/8, 48#, H-40, 8rd, ST&C casing. Total Length 504.95', Casing Set @ 501'.  
 Cement Report: Pump 200 sxs THX SET, 300 sxs 35/65, 200 sxs C 2% CaCl, plug down @ 8pm, DID NOT CIRC.  
 WOC, TIH WITH 1" TAG @ 388'. WAIT ON BJ CMT BULK TRUCK.  
 PLUG #1 - 50 sxs "C" 4% CaCl



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 has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Jim Stevens TITLE OPERATIONS MANAGER DATE 10/16/2006  
 Type or print name JIM STEVENS E-mail address: jstevens@jcleo.com Telephone No. (432)550-8887  
 For State Use Only

Accepted for record - NMOCD  
 APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 10/19/06  
 Conditions of Approval (if any): \_\_\_\_\_