

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. 30-025-11180
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 21692

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water Injector
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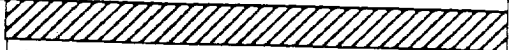
2. Name of Operator Betwell Oil & Gas Company
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3. Address of Operator P.O. Box 2577, Hialeah, Florida 33012

4. Well Location Unit Letter <u>J</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line

Section <u>21</u> Township <u>24S</u> Range <u>37E</u> NMPM Lea County
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10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3216' GL
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7. Lease Name or Unit Agreement Name Black

8. Well No. 1

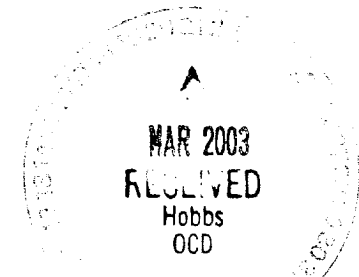
9. Pool name or Wildcat Langlie Mattix 7 Rvrs Q Grb
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11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: _____ <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: repaired wellhead <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.

Dug out wellhead & found leak. Broke out and removed bad slips and replaced. Changed out connection. Ran MIT test. Well passed test.



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

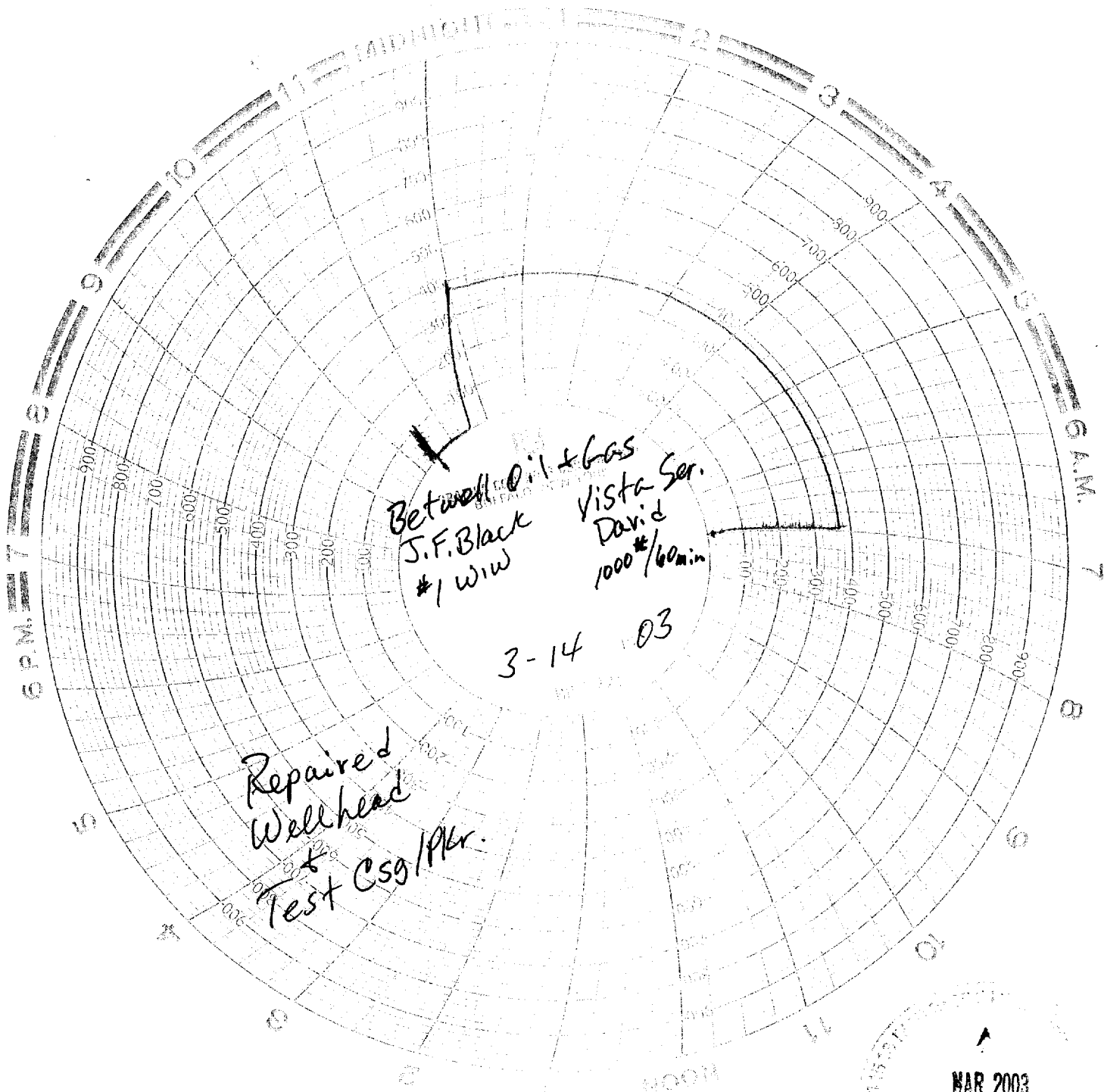
SIGNATURE Debi Newsom TITLE Agent DATE 3/19/03

TYPE OR PRINT NAME Debi Newsom TELEPHONE NO. 915-620-6038

(This space for State Use) ORIGINAL SIGNED BY GARY W. WINK

APPROVED BY OC FIELD REPRESENTATIVE II/STAFF MANAGER TITLE _____ DATE MAR 25 2003

CONDITIONS OF APPROVAL, IF ANY:



MAR 2003
RECEIVED
Hobbs
OCD

Witnessed by
Cam Robles
3-14-03