

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
March 4, 2004

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

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|-----------------------------------------------------------------------------------------------------|
| WELL API NO. 30-025-35673 |
| 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. 25696 |
| 7. Lease Name or Unit Agreement Name State 1-29 |
| 8. Well Number 9 |
| 9. OGRID Number |
| 10. Pool name or Wildcat Hobbs: Upper Blinberry |

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 **Texland Petroleum - Hobbs L.L.C.**
3. Address of Operator **777 Main #3200 Pecos, TX 76102**
4. Well Location

Unit Letter **P** : **1080** feet from the **South** line and **1300** feet from the **East** line
Section **29** Township **18 S** Range **38 E** NMPM County **Lea**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3646

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL _____ Sect _____ Twp _____ Rng _____ Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____
Distance from nearest surface water _____ Below-grade Tank Location UL _____ Sect _____ Twp _____ Rng _____;
_____ feet from the _____ line and _____ feet from the _____ line

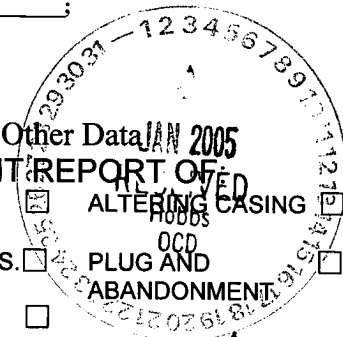
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: **Polymer Treatment** ☒



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.

12-14-04 M/Tiorco Polymer Service. Start polymer treatment down injection thg. SI well for 7 days before returning to injection. Tiorco pumped 500 bbls of Polymer 1500 ppm gel, flush w/60 bbls. Final surf -1090 psi. Avg rate 1144 BPD.

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 **Diane Harber** TITLE **Regulatory Assistant** DATE **12-30-04**
Type or print name **Diane Harber** E-mail address: _____ Telephone No. **817-336-2751**

(This space for State use)

APPROVED BY **Harry W. Wink** TITLE _____ DATE _____
Conditions of approval, if any: _____

OCD FIELD REPRESENTATIVE (STAFF AVAILABLE)

JAN 10 2005