

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

Form C-103  
Revised July 18, 2013

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-02459 ✓
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> <u>SALT WATER DISPOSAL</u>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> <u>Fed</u>
2. Name of Operator BURK ROYALTY CO., LTD.		6. State Oil & Gas Lease No. LC-066126-C
3. Address of Operator P.O. BOX 94903, WICHITA FALLS, TX 76308		7. Lease Name or Unit Agreement Name CRUCES FEDERAL ✓
4. Well Location Unit Letter <u>N</u> : <u>330</u> feet from the <u>SOUTH</u> line and <u>1655</u> feet from the <u>WEST</u> line Section <u>26</u> Township <u>20S</u> Range <u>34E</u> NMPM LEA County		8. Well Number <u>003</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3725' GL		9. OGRID Number <u>3053</u>
		10. Pool name or Wildcat YATES/SEVEN RIVERS

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 COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: REQUIREMENT FOR UIC PROGRAM ☒

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.

AS STATED IN YOUR LETTER OF NOVEMBER 27, 2013, THE REQUIRED ANNUAL MECHANICAL INTEGRITY TEST WAS PERFORMED 12-18-2013 TO COMPLY WITH THE UNDERGROUND INJECTION CONTROL PROGRAM (UIC) FOR YEAR ENDING 2013. A COPY OF THE PRESSURE TEST CHART INDICATING THE TEST MET REQUIREMENTS IS ATTACHED.

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

*J. H. Bear*

TITLE PETROLEUM ENGINEER

DATE 12/31/2013

Type or print name JON H. BEAR

E-mail address: diana@burkroyalty.com

PHONE: 940-397-8638

For State Use Only

APPROVED BY:

*M. J. Brown*

TITLE

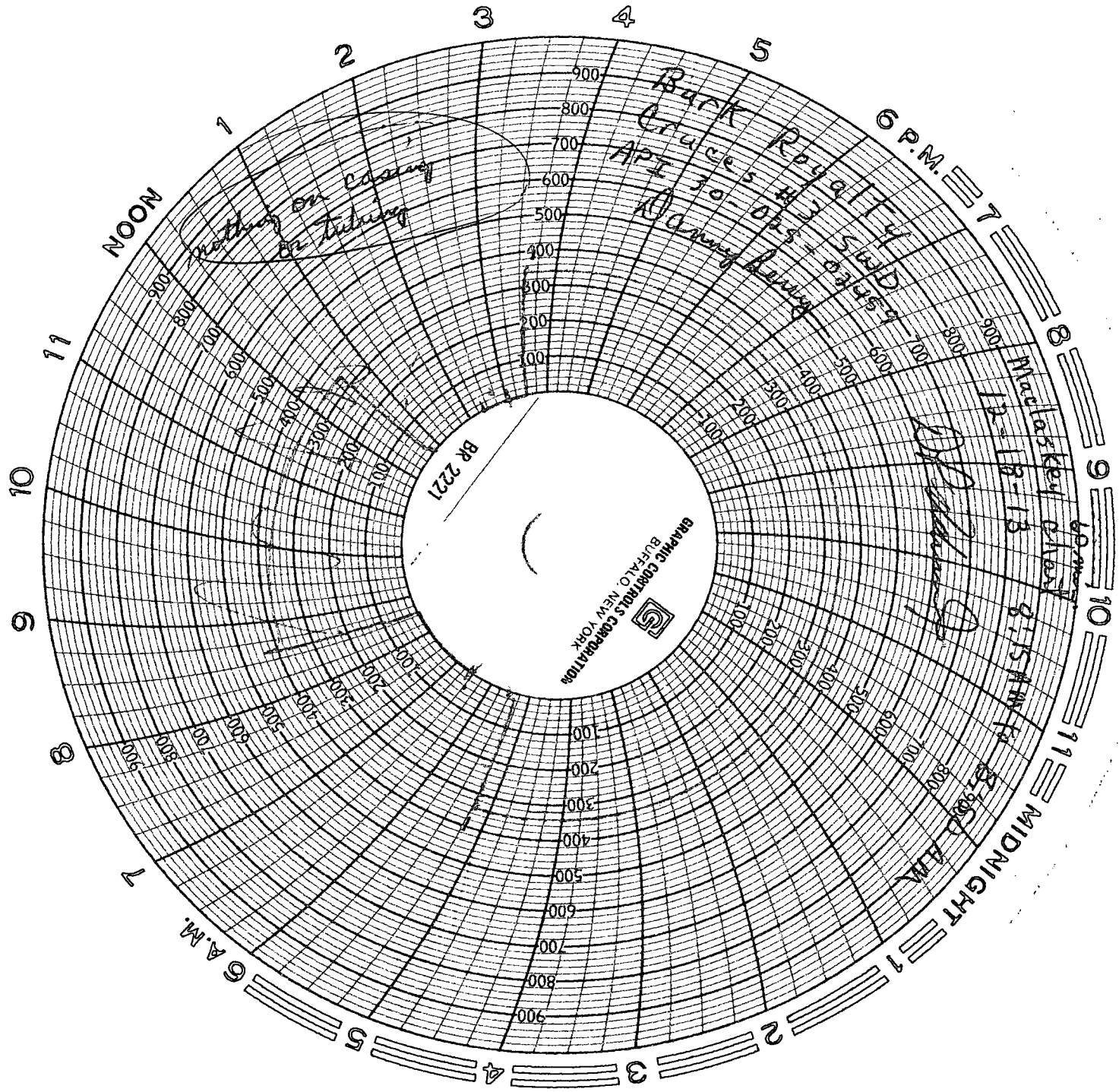
*Compliance Officer*

DATE

*1/6/2014*

Conditions of Approval (if any):

JAN 13 2014



✓