

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                        |  |
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                                                                                                                                                                                                                          |  |                                                                                                                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p>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.</p> |  | <p>5a. Indicate Type of Lease</p> <p>State <input type="checkbox"/> Fee <input checked="" type="checkbox"/></p> <p>5. State Oil &amp; Gas Lease No.</p> |
| <p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- CO2 Well</p>                                                                                                   |  | <p>7. Unit Agreement Name</p>                                                                                                                           |
| <p>2. Name of Operator</p> <p>AMERIGAS, INC., CO2 Division</p>                                                                                                                                                           |  | <p>8. Firm or Lease Name</p> <p>Albert Mitchell</p>                                                                                                     |
| <p>3. Address of Operator</p> <p>4455 LBJ Freeway, Suite 1100, Dallas, Texas 75234</p>                                                                                                                                   |  | <p>9. Well No.</p> <p>Mitchell 10</p>                                                                                                                   |
| <p>4. Location of Well</p> <p>UNIT LETTER <u>H</u> <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>1070</u> FEET FROM THE <u>East</u> LINE, SECTION <u>19</u> TOWNSHIP <u>19N</u> RANGE <u>30E</u> NMPM.</p>          |  | <p>10. Field and Pool, or Wildcat</p> <p>Mitchell-Abo</p>                                                                                               |
| <p>15. Elevation (Show whether DF, RT, CR, etc.)</p> <p>TC 4458</p>                                                                                                                                                      |  | <p>12. County</p> <p>Harding</p>                                                                                                                        |

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

|                                                                                                                                                                                                                                    |                                                                                               |                                                                                                                                                                                                        |                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| <p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER <u>Test Casing</u> <input checked="" type="checkbox"/></p> | <p>PLUG AND ABANDON <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p> | <p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPS. <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOBS <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p> | <p>ALTERING CASING <input type="checkbox"/></p> <p>PLUG AND ABANDONMENT <input type="checkbox"/></p> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Pull tubing and test casing. Retube with coated tubing and packer. Test and return to production. Load the annular space with packer fluid.

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

SIGNED R.M. Kuehlman TITLE Reg. Prod. Mgr. DATE 9/6/85

APPROVED BY Roy E. Johnson TITLE DISTRICT SUPERVISOR DATE 9-16-85

CONDITIONS OF APPROVAL, IF ANY: