

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 87210
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

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

Form C-103

Revised March 25, 1999

WELL API NO. <u>60822</u> <u>30-005-60270</u>
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <u>SKIP</u>
8. Well No. <u>1</u>
9. Pool name or Wildcat <u>ELKINS</u>

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
M.E.W. Enterprise

3. Address of Operator
P.O. Box 39 Roswell, N.M. 88202

4. Well Location
Unit Letter P : 660 feet from the S line and 660 feet from the E line
Section 26 Township 7-S Range R28E NMPM County CHAURS

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

11. 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: ☐

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. we wish to go BACK into well, clean out to PBTD of 2790', recomplete P-3, P-2, P-1 of the San Andres formation & put on production. work should be completed no later than July 30, 2006

- Show proposed pfs in feet
- Describe what pressure control device you intend to use
- Complete on current forms C101, C102
- H2S in area? - Refer to NMCCD rule 118.

Bryan Narant

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

SIGNATURE Russell Whitel TITLE Pres DATE 12-13-05

Type or print name Russell Whitel Telephone No. 627-2065

(This space for State use)

DENIED

APPROVED BY _____ TITLE _____ DATE DEC 15 2005

Conditions of approval, if any: Please submit correct form C101, C102
You are re-entering a P&A'd well