

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  
 Revised June 10, 2003

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

WELL API NO  
 30-015-33255

5. Indicate Type of Lease  
 STATE  FEE

6. State Oil & Gas Lease No.  
 K06527

7. Lease Name or Unit Agreement Name  
 Eaglette State

8. Well Number  
 001

9. OGRID Number  
 017985

10. Pool name or Wildcat  
 Seven Rivers

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3297GL

RECEIVED  
 JUL 20 2005  
 ODD-ARTESIA

**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  
 Premier Oil & Gas, Inc.

3. Address of Operator  
 P.O. Box 1246, Artesia, NM 88211-1246

4. Well Location  
 Unit Letter P : 330 feet from the South line and 330 feet from the East line  
 Section 25 Township 20S Range 27E NMPM Eddy County

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

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

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.

Premier plugged and abandoned this well as follows:

1. Set CIBP @ 540'. Pressure tested plug to 1000 psi for 30 minutes.
2. Filled 5-1/2" casing from 540' to surface w/Class C cement.
3. Installed a Dry Hole Marker
4. Stripped caliche pad and cleaned location.

Approved as to plugging of the well bore. Liability under bond is retained until surface restoration, environmental remediation and final inspection is completed.

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

SIGNATURE Rosalie Jones TITLE President DATE 7/19/05  
 Type or print name Rosalie Jones E-mail address: \_\_\_\_\_ Telephone No. 505-748-2093  
 (This space for State use)

APPROVED BY \_\_\_\_\_ TITLE Accepted for record NMOCD DATE AUG 9 2006  
 Conditions of approval, if any: