

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
May 27, 2004

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

WELL API NO.
30-015-28306
5. Indicate Type of Lease
STATE ☐ FEE ☐
6. State Oil & Gas Lease No.
BLM LC-029435-A

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 Injector ☐
2. Name of Operator
Merit Energy Company
3. Address of Operator
13727 Noel Road, Suite 500 Dallas, Texas 75240
JUL - 2 2007
OCD-ARTESIA

7. Lease Name or Unit Agreement Name
Keel, J. L. "A"
8. Well Number 030
9. OGRID Number 14591
10. Pool name or Wildcat
Grayburg-Jackson

4. Well Location
Unit Letter _____: 430 _____ feet from the _____ line and _____ 2013 _____ feet from the _____ line
Section 7 Township 17-S Range 31-E NMPM Eddy County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application ☐ or Closure ☐
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Reduced Injection pressure <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.

This well was injecting over the authorized injection pressure on 4/4/2007. Well shut-in at that time. During shut-in time the pressure bled off the well. Well flowed back to reduce any additional pressure. NMOCD Field Inspector observed the well being returned to injection and the injection pressure is below the authorized injection pressure. Well returned to injection on 6/26/2007.

ACCEPTED FOR RECORD

JUL 9 2007

Gerry Guye, Deputy Field Inspector
NMOCD-District II ARTESIA

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 Garry M. Sanders TITLE Sr. Regulatory Analyst DATE 06/28/2007
Type or print name E-mail address: Telephone No. (972) 628-1610
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____