Submit 3 Copies To Appropriate District Office		State of New Mexico		Form C-103	
District I	Energy, Minerals and Natural Resources		Revised June 10, 2003 WELL API NO.		
1625 N. French Dr. Hobbs, NM 88240 District II	OIL CONSERVATION DIVISION			30 015 02017	
1301 W. Grand Ave. Artesia, NM 88210				5. Indicate Type	of Lease
District III 1000 Rio Brazos Rd., Azicc. NM 87410	1220 South St. Francis Dr.			STATE	
District IV	Santa Fe, NM 87505			6. State Oil & G	as Leasé No.
1220 S. St. Francis Dr., Santa Fe, NM 87505				647	
	ICES AND REPORTS (ON WELLS	1 •	7. Lease Name o	or Unit Agreement Name
(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				State 647 AC 713	
PROPOSALS.)				8. Well Number	
1. Type of Well:	Other (Injection)			122	
Oil Well X Gas Well	Gas Well Other (Injection)				
				9. OGRID Number	
Melrose Operating Company 184860 OCD-ARTESIA				184860	
3. Address of Operator c/o Box 953 Midland, TX 79702				10. Pool name or Wildcat: Artesia; Queen/Grayburg/San Andres	
4. Well Location	Midiaid, 1A 19102			Artesia, Queen	/Orayourg/San Andres
1. Weil Edentidii					
Unit Letter A : _660feet from the _North _ line and660 _ feet from the _East _ line					
Section 22 Township	18S Range 2	28E	NMPM Edd	v County	
	11. Elevation (Short)				
A STATE OF THE STA	is i	·		7.72	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK	PLUG AND ABANDO	N 🗌	REMEDIAL WOR	K X	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI	LLING OPNS	PLUG AND
PULL OR ALTER CASING					ABANDONMENT
	COMPLETION		CEMENT JOB	-	
OTHER:			OTHER: Well p	out back on product	tion
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 6-12-07: Rigged up, unseat pump & trip out of hole with pump & rods.					
6-13-07: Tested tubing to 5000 psi. TIH & tag bottom @ 2507'.					
6-14/15-07: Circulate hole, go in with tubing to 2507', swabbing.					
6-27-07: Unit set, well puming.					
Well Test: 4.5 bbls oil, 40 bbls wat	er and 0 gas.				
,					
Well put back on production as part of ACO compliance order.					
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
LIFAH					
SIGNATURE TITLE Regulatory Agent DATE: 7-20-07					
Type or print name Ann E. Ritchie E-mail address: ann.ritchie@wtor.net Telephone No. 432 684-6381					
(This space for State use)					
ADDDD AVED DV Accorded	for record - NMOCD	reserve e			DATE 1/20/07
APPPROVED BY Accepted Conditions of approval, if any:	m ittere . MMCCD	_TITLE			_DATE// Z/)
Conditions of approval, it any:					•