

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. 30-015-26029
5. Indicate Type of Lease <input checked="" type="checkbox"/> Federal STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM 24160
7. Lease Name or Unit Agreement Name Parkway Delaware Unit
8. Well Number 505
9. OGRID Number 154903
10. Pool name or Wildcat Parkway Delaware

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other – Water Injection	
2. Name of Operator St. Mary Land & Exploration Company	MAY 22 2008
3. Address of Operator 3300 N. A Street, Bldg #7, Suite 200, Midland, TX 79705	OCD-ARTESIA
4. Well Location Unit Letter <u>L</u> : <u>1980</u> feet from the <u>South</u> line and <u>760</u> feet from the <u>West</u> line Section <u>35</u> Township <u>19S</u> Range <u>29E</u> NMPM County <u>Eddy</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3328' RKB 3319' GR</u>	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: _____

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: _____

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.

POOHw/128jts 2 3/8" tbg and Baker AD – packer. GIH w/tbg and packer Hydrotest tbg in hole. Found tbg to be bad. POOH laying down tbg string. GIH w/new 2 3/8" tbg and packer. Set packer @ 4182'. Return well to Injection

Successful MIT test performed 5/12/08. Chart was retained by NMOCD Field Inspector, 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 Donna Huddleston TITLE Production Tech DATE 05/20/08

Type or print name Donna Huddleston E-mail address: dhuddleston@stmaryland.com Telephone No. 432-688-1789

For State Use Only

APPROVED BY: Richard Inge TITLE Compliance Officer DATE 6/6/08
Conditions of Approval (if any): _____