

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

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

WELL API NO. 30-015-04048
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-8146
7. Lease Name or Unit Agreement Name BURNHAM GB SA UNIT
8. Well Number 6-2
9. OGRID Number 216852
10. Pool name or Wildcat SQUARE LAKE GB SA

<p>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.)</p>	
<p>1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other WATER INJECTION WELL</p>	
<p>2. Name of Operator CBS OPERATING CORP.</p>	
<p>3. Address of Operator P O BOX 2236, MIDLAND, TX 79702</p>	
<p>4. Well Location Unit Letter <u>N</u> : <u>660</u> feet from the <u>south</u> line and <u>1980</u> feet from the <u>west</u> line Section <u>2</u> Township <u>17S</u> Range <u>30E</u> NMPM Eddy County NM</p>	
<p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3745' GL</p>	

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 COMPLETION ☐
 OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
 CASING TEST AND 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.

Anticipate rigging up on well October 2, 2003 to repair hole in production casing found at 11' below surface. (See attached description of problem and well bore diagram).

1. Cut off 7" production casing below hole at 11' from surface.
2. Weld on new 7" casing stub (12'+-) back to surface.
3. Reset injection packer and test back side.
4. If back side does not hold, come out of hole testing injection tubing.
5. Replace suspected tubing leak, RIH and reset packer and test back side.

Notify OCD 24 hours
prior to test. 748-1283

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

SIGNATURE [Signature] TITLE Engineer DATE 9-30-03

Type or print name M. A. SINGH III E-mail address msingh@state.nm.gov Telephone No 432/685-0878
(This space for State use)

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]

Conditions of approval, if any:

APPROVED NOV 13 2003