Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103	
Office District I	Energy, Minerals and Natur	al Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 87240			WELL API NO.	
District II	OIL CONSERVATION DIVISION		30-005-63928	
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease	
000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505		STATE 🗷	FEE 🗆	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Lea	se No.
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name 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 PROPOSALS.)			OLD ROSEBUD 1524-36 A STATE	
1. Type of Well:		8. Well Number		
Oil Well Gas Well 🗷			1	
2. Name of Operator	QL.		9. OGRID Number	
PARALLEL PETROLEUM CORPORA	TION OCU	LARTESIA	230387	
3. Address of Operator		10. Pool name or Wildcat		
1004 N BIG SPRING, SUITE 400, MIDLAND, TX 79701			COTTONWOOD CREEK WOLFCAMPWEST	
4. Well Location				
Unit Letter P:	290 feet from the SOU	TH line and	150 feet from the	eEASTline
Section 36	Township 158	Range 24E	NMPM C	ounty CHAVES
	11. Elevation (Show whether		tc.)	
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: Volumebbls; Construction Material				
THE LINE I III CKIICSS IIII DEIOW-GIAUT 12BK. VOIUME DDIS, COISTIUCTOI MATERIAI				
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
PERFORM REMEDIAL WORK	PLUG AND ABANDON [_]	REWEDIAL WORK	Ц ^	LTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL	<u> </u>	LUG AND
PULL OR ALTER CASING .	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB	X	
OTHER:		OTHER: 10 CORRE	CT PREVIOUSLY REPORT	ED OUT CER
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 C-103 FILED TO CORRECT PREVIOUSLY REPORTED TO:  07-18-2008: TD @ 1930 HR, 8953 MD, 4701 TVD  (PREVIOUS TO WAS REPORTED INCORRECT)				
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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/pril be constructed or closed according to NMOCD guidelines, a general permit or an (attached) alternative OCD-approved plan				
SIGNATURE THE				TE <u>09-19-2008</u>
Type or print name KAYE MC CORMI		nail address:	kmccormick@plll.co Telephon	na e No. <b>432-685-6563</b>
For State Use Only				
APPROVED BY	Accepted for respire	ΓLE	DAT	`E
Conditions of Approval. if any:	NMOCD			