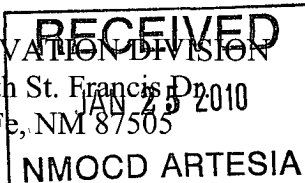


Submit 1 Copy to Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

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



WELL API NO. 30-015-29260
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Jenna Com
8. Well Number 1
9. OGRID Number 25706
10. Pool name or Wildcat SWD; Canyon
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3604' GR

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 **Injection Well**

2. Name of Operator **Clayton Williams Energy, Inc.**

3. Address of Operator
Six Desta Dr., #2100, Midland, TX 79705

4. Well Location
Unit Letter **I** : **2110** feet from the **south** line and **990** feet from the **east** line
Section **5** Township **17S** Range **29E** NMPM **Eddy** County

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 ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

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

✓ OTHER: **Repair Casing Leak**

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

MI & RU pulling unit. Repair possible casing leak. Began operations 1/21/2010

Spud Date:

Rig Release Date:

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

SIGNATURE Betsy Luna TITLE Engineering Tech DATE 01/21/2010

Type or print name Betsy Luna E-mail address: bluna@claytonwilliams.com PHONE: 432-688-3240

For State Use Only

APPROVED BY: Jaquie B TITLE Geologist DATE 1/26/2010

Conditions of Approval (if any):