Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103 May 27, 2004
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210				30-015-25366 5. Indicate Type of Lease
District III 1220 South St. Francis Dr.			STATE STATE FEE	
District IV Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Lease No.	
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.)				7. Lease Name or Unit Agreement Name CONNIE C STATE
1. Type of Well: Oil Well Gas Well Other			8. Well Number #1	
2. Name of Operator NEW MEXICO OCD FOR YESO I	ENERGY	RECE		9. OGRID Number
3. Address of Operator		FEB 1	8 2010	10. Pool name or Wildcat
4. Well Location		NMOCD	ARTESIA	
Unit Letter G: 1980 feet from the N line and 1980 feet from the E line				
Section 25 Township 195 Range 28E NMPM County Eddy				
	11. Elevation (Sho	www.whether DR,	RKB, RT, GR, ei	c.)
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: Volume bbls; Construction Material				
12. Check A	ppropriate Box t	to Indicate Na	ature of Notice	e, Report or Other Data
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒  TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐				
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB				
OTHER:			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.				
1. RIH AND SET 5 ½" CIBP @ 3161' – TOP WITH 25 SACKS – CIRCULATE PLUGGING MUD				
<ol> <li>PERF AND SPOT 35 SACKS @ 2210' – WOC – TAG – TEST CASING</li> <li>PERF AND SPOT 35 SACKS @ 490' - TAG</li> </ol>				
4. PERF AND CIRCULATE 50 SACKS FROM 300' TO SURFACE				
5. INSTALL DRY HOLE MARKER AND CLEAN UP LOCATION				
				Notify OCD 24 hrs. prior To any work done.
STEEL PITS WILL BE USED FOR THIS PROCEDURE				
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 Med Af		TITLE_a	gent for ocd	DATE_6/4/09
Type or print name E-mail address: For State Use Only			Telephone No.	
44	D.	TITE F	Annound A	DATE 3/ch
APPROVED BY TO TITLE Approval Granted providing work DATE 3/8/2000 Conditions of Approval (if any): is complete by 6/5/2000				