

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

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-103

October 13, 2009

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.)		WELL API NO. 30-015-04031
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CBS Operating Corp.		6. State Oil & Gas Lease No. B-2884
3. Address of Operator P O Box 2236 Midland TX 79702		7. Lease Name or Unit Agreement Name North Square Lake Unit
4. Well Location Unit Letter <u>A</u> : <u>810</u> feet from the <u>north</u> line and <u>660</u> feet from the <u>east</u> line Section <u>36</u> Township <u>16S</u> Range <u>30E</u> NMPM Eddy County NM		8. Well Number <u>96</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3807 GL		9. OGRID Number 216852
		10. Pool name or Wildcat Square Lake GB SA

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

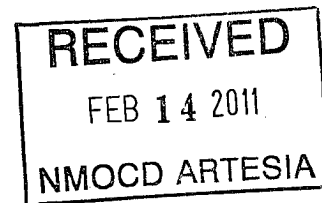
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: Install Well Sign ☒

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.

Inspection No. iKMW1101228712

Install well sign February 10, 2011



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

L. A. Sirgo

TITLE

Engineer

DATE Feb. 10, 2011

Type or print name M. A. Sirgo, III

E-mail address: mastres@aol.com

PHONE: 432/685-0878

For State Use Only

Accepted for record *[Signature]*

TITLE

DATE 2-15-11

Conditions of Approval (if any):

NMOCD

