

xSubmit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 811 South First, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

WELL API NO.
 30-041-00256

5. Indicate Type of Lease
 STATE FEE X

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.)

1. Type of Well:
 Oil Well Gas Well Other INJECTION

2. Name of Operator
 J. CLEO THOMPSON

3. Address of Operator
 325 N. ST. PAUL, SUITE 4300, DALLAS, TX 75201

4. Well Location
 Unit Letter B : 660 feet from the NORTH line and 1980 feet from the EAST line
 Section 13 Township 8S Range 34E NMPM County R00SEVELT

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
 4260' GL

7. Lease Name or Unit Agreement Name:
 MILNESAND UNIT

8. Well No. 59

9. Pool name or Wildcat
 MILNESAND (SAN ANDRES)

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: MIT FOR OCD <input checked="" type="checkbox"/>	
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12. 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 re-completion.

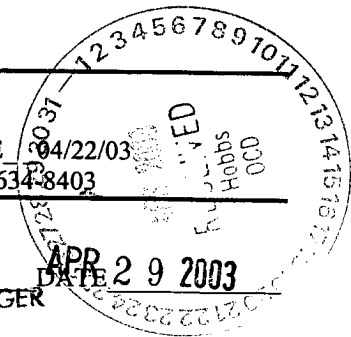
- 1.) RU BASIC WELL SERVICE.
- 2.) FLOWED WELL DOWN, TALLIED AND PICKED UP 137 JTS 2 1/16" 10RD IJ TBG.
- 3.) RIH WITH MILL TO CLEAN OUT TBG.
- 4.) CIRCULATED PACKER FLUID AND SET NATIONAL OILWELL TPL INJECTION PACKER @ 4458'.
- 5.) PERFORMED MIT FOR OCD.

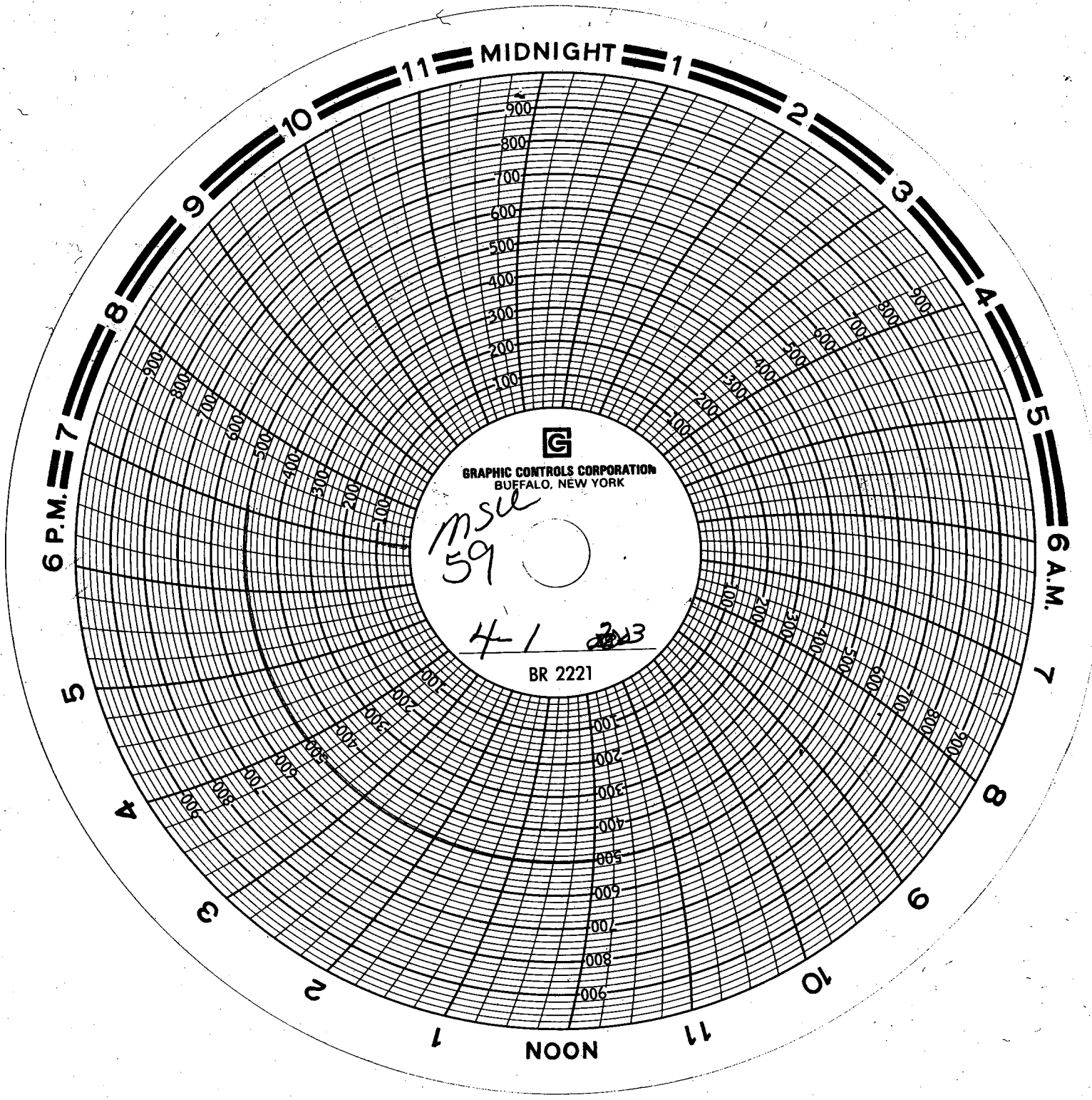
NOTE:
 I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE John Hughes TITLE FOREMAN DATE 04/22/03
 Type or print name JOHN HUGHES Telephone No. (432)634-8403

(This space for State use)

APPROVED BY Larry W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER
 Conditions of approval, if any:





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GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

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