| Submit 3 Copies To Appropriate District                                                                                                             | State of N                                        |                                             | Form C-103<br>May 27, 2004                           |                                      |                   |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------|------------------------------------------------------|--------------------------------------|-------------------|--|
| Office<br><u>District I</u><br>1625 N. French Dr., Hobbs, NM 88240                                                                                  | Energy, Minerals ar                               |                                             | WELL API NO.                                         |                                      |                   |  |
| District II                                                                                                                                         | OIL CONSERVA                                      |                                             | 30-041-20936                                         |                                      |                   |  |
| 1301 W. Grand Ave., Artesia, NM 88210                                                                                                               | 1220 South S                                      |                                             | 5. Indicate Type of Lease STATE FEE                  |                                      |                   |  |
| District III<br>1000 Rio Brazos Rd., Aztec, NM 87410                                                                                                | Santa Fe,                                         |                                             | 6. State Oil & Gas Lease No.                         |                                      |                   |  |
| District IV<br>1220 S. St. Francis Dr., Santa Fe, NM                                                                                                | Santa Pe,                                         | n/a                                         | n/a                                                  |                                      |                   |  |
| 505 SUNDAY NOTICES AND REPORTS ON WELLS                                                                                                             |                                                   |                                             | 7. Lease Name                                        | 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 |                                                   |                                             | BRYNN FEE                                            | BRYNN FEE                            |                   |  |
| PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other                                                                                             |                                                   |                                             |                                                      | 8. Well Number                       |                   |  |
|                                                                                                                                                     |                                                   |                                             | 9. OGRID Nut                                         | 9. OGRID Number                      |                   |  |
| Name of Operator MANZANO, LLC                                                                                                                       |                                                   |                                             |                                                      | 231429<br>10. Pool name or Wildcat   |                   |  |
| 3. Address of Operator<br>P.O. BOX 2107 - ROSWELL, NM 88202-2107                                                                                    |                                                   |                                             |                                                      | WILDCAT                              |                   |  |
| 4. Well Location                                                                                                                                    | 1000 6-46-44                                      | NORTH line an                               | i 660 fee                                            | from the                             | EAST line         |  |
|                                                                                                                                                     | 1980 feet from the _ 35 Township                  |                                             | BE NMPM                                              | ROOSEVELT                            |                   |  |
| Section Section                                                                                                                                     | 11. Elevation (Show who                           |                                             | etc.)                                                |                                      |                   |  |
| Fit or Below-grade Tank Application . 1 o                                                                                                           | Closure                                           |                                             |                                                      |                                      |                   |  |
| Plt type Depth to Groundwa                                                                                                                          | iterDistance from mean                            | rest fresh water well                       |                                                      |                                      |                   |  |
| Pit Liner Thickness: mil                                                                                                                            | Below-Grade Tank: Vol                             |                                             | Construction Materia                                 |                                      |                   |  |
| 12. Check A                                                                                                                                         | Appropriate Box to Inc                            | dicate Nature of Not                        | ice, Report or Oth                                   | er Data                              |                   |  |
| NOTICE OF IN                                                                                                                                        | TENTION TO:                                       |                                             | UBSEQUENT F                                          | REPORT OF                            | F:                |  |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL W                                                                                                   |                                                   |                                             |                                                      |                                      | CASING 🗆          |  |
| EMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL                                                                                                       |                                                   |                                             | DRILLING OPNS.                                       | PANDA                                |                   |  |
| PULL OR ALTER CASING                                                                                                                                |                                                   | CASING/CE                                   | MENT JOB                                             |                                      |                   |  |
| OTHER:                                                                                                                                              |                                                   | OTHER:                                      |                                                      |                                      |                   |  |
| 13. Describe proposed or compost starting any proposed work). SEI                                                                                   | leted operations. (Clearly                        | state all pertinent detail                  | s, and give pertinent of                             | dates, including                     | g estimated date  |  |
| ı                                                                                                                                                   |                                                   |                                             |                                                      |                                      |                   |  |
| PROPOSE TO PLUG AND ABAN                                                                                                                            | DON BY; (1) CUTOFF &                              | PULL 5.5" CASING @                          | 3620', (2) SET CH                                    | 3P W/10sx OF (                       | CEMENT ON         |  |
| rop @ 4100' (PERFS @ 4165'-41'<br>@ 3620'), (4) SET 25sk Class "C" I                                                                                | 34'), (3) SET 259K CLASS<br>SELIG FROM 1800'-1900 | S "C" SHOE PLUG FRU<br>' (TOP OF SALT @ 190 | )(M, 35 / U - 36 / U - & 1<br>)(O'). (5) SET 25sk CI | LASS "C" PLU                         | G FROM350'-       |  |
| ## 3020 ), (4) 3E1 23SK Class C 1<br>450' (13 3/8" SHOE @ 400'), (6) Si                                                                             | FT 10ek CLASS "C" SUR                             | REACE PLUG. (7) INST                        | ALL DRY HOLE M                                       | ARKER                                |                   |  |
|                                                                                                                                                     | BI IVOR CLADO C GOD                               | W 1102 / 200; (/) 11101                     |                                                      |                                      |                   |  |
| •                                                                                                                                                   |                                                   |                                             |                                                      |                                      |                   |  |
|                                                                                                                                                     |                                                   |                                             |                                                      |                                      |                   |  |
|                                                                                                                                                     |                                                   |                                             |                                                      |                                      |                   |  |
| :                                                                                                                                                   |                                                   |                                             |                                                      |                                      |                   |  |
|                                                                                                                                                     |                                                   |                                             |                                                      |                                      |                   |  |
|                                                                                                                                                     |                                                   |                                             |                                                      |                                      |                   |  |
| I hereby certify that the information                                                                                                               | above is true and complet                         | te to the best of my know                   | viedge and belief. I i                               | urther certify that                  | any pit or below- |  |
| grade tank has been/will be constructed or                                                                                                          | closed according to MMUCD                         | antenues □' # Sederm bear                   | till D. als (Mrinchen) so                            | SECURIONS OCID-N                     | Shancen from C?   |  |
| SIGNATURE Mul from                                                                                                                                  |                                                   | TITLE                                       | MANAGER_                                             | DATE                                 | 05/20/08          |  |
| Type or print name                                                                                                                                  |                                                   | E-mail address:                             |                                                      | Telephone No                         | ).                |  |
| For State Use Only                                                                                                                                  | - (                                               |                                             |                                                      |                                      |                   |  |
| APPROVED BY: Men C                                                                                                                                  | Illiam OC                                         | DESTRICT SUPERVISOR                         | prgeneral man                                        | AGER DATE                            | NY 2 1 200        |  |
| Conditions of Approval (if any):                                                                                                                    |                                                   |                                             |                                                      |                                      |                   |  |
| THE OIL CONSERVATION DIVIS BE NOTIFIED 24 HOURS PRIOR                                                                                               | ON MUST                                           |                                             | •                                                    |                                      |                   |  |

BEGINNING OF PLUGGING OPERATIONS