

Submit 3 Copies 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
Revised June 10, 2003

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. 30-025-36464
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 Tom Brown, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator P O Box 2608, Midland, TX 79702		7. Lease Name or Unit Agreement Name Shelley 36 State
4. Well Location Unit Letter <u>N</u> : <u>660</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>36</u> Township <u>19S</u> Range <u>37E</u> NMPM Lea County		8. Well Number 006
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3600		9. OGRID Number 023230
		10. Pool name or Wildcat Skaggs; Drinkard (57000)

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

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

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.

11/29/03 Notified OCD @ 9:30 CST

11/29/03 Spud Well @ 16:30 CST

11/30/03 Drill 12-1/4" hole to 1515'. Run 36 jts of 8-5/8" csg (total length 1531, set @ 1515). Cement lead w/ 465 sx Halliburton Light Premium Plus + .25 # sx Flocele + 2% CaCl₂, 12.5 ppg, 1.95 yld. Tail: 205 sx Premium Plus + 2% CaCl₂. Displace w/ brine water. Landed plastic core plug. "ok": Circ 124 sx to pit. Finish job @ 21:55 11/30/03 CST WOC 14-1/2 hrs.

12/01/03 Cut off conductor. Weld on casing head. NU BOP.

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

SIGNATURE Diane Kuykendall TITLE Operations Asst/Tech DATE 12/09/03

Type or print name Diane Kuykendall E-mail address: dkuykendall@tombrown.com Telephone No. 432-688-9773

(This space for State use)

APPROVED BY Chris Williams TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE DEC 12 2003

Conditions of approval, if any: