Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-26555 District II OIL CONSERVATION DIVISION -811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III FEE  $\square$ STATE 😠 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District JV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe. NM 87505 E-398 SUNDRY NOTICES AND REPORTS ON WELLS 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 PROPOSALS.) State BY 1. Type of Well: Oil Well X Gas Well Other 8. Well No. 2. Name of Operator Cross Timbers Operating Company 9. Pool name or Wildcat 3. Address of Operator Corbin (Queen) 3000 N. Garfield, Suite 175 Midland, Texas 79705 4. Well Location feet from the 660 South line and line Unit Letter \_\_\_ feet from the County **NMPM** NM Township **T17S** Range Lea 32 Section 10. Elevation (Show whether DR, RKB, RT, GR, etc.) GR 4023.3' 11. Check Appropriate Box to Indicate, Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: **ALTERING CASING** REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON PLUG AND **CHANGE PLANS** COMMENCE DRILLING OPNS. **TEMPORARILY ABANDON ABANDONMENT** CASING TEST AND **MULTIPLE** PULL OR ALTER CASING **CEMENT JOB** COMPLETION  $\mathbf{x}$ OTHER: Mechanical Integrity Test OTHER: 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 recompilation. 3/23/01 MI & RU well service unit. PU 5-1/2" CTBP and set @ 2,660'. MIRU pump truck. Circ hole w/pkr fluid. Pressure tested TCA w/600 psig. Held press for 30 minutes. Successful test. OCD notified and test was witnessed by Billy Pritchard w/OCD/Hobbs. Original chart attached. Request T.A. status for well. This Approval of Temporary 4/2006. I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Regulatory Tech DATE \_\_\_\_ 3/30/2001 SIGNATURE. Telephone No. 915/682-8873 Type or print name Janice Courtney (This space for State use) DATE TITLE APPROVED BY\_ Conditions of approval, if any:

