

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

Form C-103  
 Revised March 25, 1999

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

|   |
|---|
| WELL API NO.<br>30-025-04074  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement<br>Name:<br>NORTHWEST EUMONT UNIT                                   |
| 8. Well No.<br>139  |
| 9. Pool name or Wildcat<br>EUMONT YATES   |

**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 - WIW

2. Name of Operator  
 RHOMBUS OPERATING CO., LTD.

3. Address of Operator  
 P.O. BOX 8316 MIDLAND, TX. 79708-8316

4. Well Location  
 Unit Letter: E : 1980 feet from the NORTH line and 660 feet from the WEST line  
 Section 26 Township 19S Range 36E NMPM LEA County

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

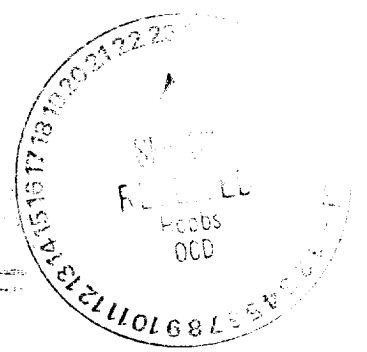
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

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

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.

TA WELL. PLEASE SEE ATTACHED CHART.

This Approval of Temporary Abandonment Expires 9-25-07



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

SIGNATURE Mabry Kniffen-Wingo TITLE MANAGER DATE September 19, 2002  
 Type or print name MABRY KNIFFEN-WINGO Telephone No. 915-683-8873  
 (This space for State use)

APPROVED BY \_\_\_\_\_ TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER  
 ORIGINAL SIGNED BY GARY W. WINK  
 Conditions of approval, if any: \_\_\_\_\_

SEP 25 2002