

Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, 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 March 25, 1999

WELL API NO. 30-053-20018	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name: NAT	
8. Well No. #2	
9. Pool name or Wildcat WILDCAT	
4. Well Location Unit Letter <u>G</u> : <u>1980</u> feet from the <u>NORTH</u> line and <u>1980</u> feet from the <u>EAST</u> line Section <u>27</u> Township <u>4N</u> Range <u>1E</u> NMPM County <u>Socorro</u>	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 5170' GR	

11. 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 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"/>	

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 recompletion.

03-10-03

Run 146 JTS 9 5/8" 43.50# CSG 6360' Cemented w/ 380 SKS 11.8# Lite Weight and 225 SKS 15.6# Class G Premium. Top of Cement Top Est. 4237'. Centralizer on 1st, 3rd, 7th, 11th, 15th, 19th, 29th, 39th, 49th, 70th, 90th, 110th.

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

SIGNATURE Nathan Twining TITLE President DATE 4/30/03

Type or print name Nathan A. Twining Telephone No. (505) 856-2238
(This space for State use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 5/5/03
Conditions of approval, if any