

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

|                              |                                                                        |
|------------------------------|------------------------------------------------------------------------|
| WELL API NO.                 |                                                                        |
| 5. Indicate Type of Lease    | STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. |                                                                        |

**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 ☒ C O 2 OTHER

2. Name of Operator  
C O 2 Inc.

3. Address of Operator  
1809 S. Midkiff Rd. Midland, Texas 79701

4. Well Location  
Unit Letter H : 1980 Feet From The North Line and 660 Feet From The East Line

Section 32 Township 21N Range 30E NMPM Harding County

7. Lease Name or Unit Agreement Name

Gonzales

8. Well No.  
A 1

9. Pool name or Wildcat  
Bueyeros

10. Elevation (Show whether DF, RKB, RT, CR, etc.)

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 checked="" type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  |                                           | CASING TEST AND CEMENT JOB <input 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.

Sept. 16 1994

M.I.R.U. Run 843 FT. 2 3/8 tubing. Circulate 38 bbls mud (9.6#)  
Spot 30 sks. cement, displace tubing with 3.6 bbls. mud.  
Pull tubing to 60 ft. spot 7 sks. cement.  
Cut off well head and anchors, clean location.  
Weld on dry hole marker.

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

SIGNATURE Robert E. Mack TITLE Owner, Macks Drilling DATE 9-19-94

TYPE OR PRINT NAME Robert E. Mack TELEPHONE NO 445-2693

(This space for State Use)  
APPROVED BY Ry E. Phum DISTRICT SUPERVISOR DATE 9-27-94

CONDITIONS OF APPROVAL, IF ANY: