

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                        |   |
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                                |                                         |
|--------------------------------|-----------------------------------------|
| 3a. Indicate Type of Lease     |                                         |
| State <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 5. 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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- Carbon Dioxide                                          | 7. Unit Agreement Name                           |
| 2. Name of Operator<br>SCHWARTZ CARBONICS                                                                                                        | 8. Farm or Lease Name<br>Norman and Esther Libby |
| 3. Address of Operator<br>Box 37, Solano, New Mexico 87746                                                                                       | 9. Well No.<br>Libby 2                           |
| 4. Location of Well<br>UNIT LETTER E 1980 FEET FROM THE North LINE AND 660 FEET FROM<br>THE West LINE, SECTION 32 TOWNSHIP 20 N RANGE 31 E NMPM. | 10. Field and Pool, or Wildcat<br>Bueyeros       |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>GL - 4600                                                                                       | 12. County<br>Harding                            |

16. 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 OPS. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input checked="" type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOB <input type="checkbox"/> |                                                          |

17. 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.

Spotted 25 sacks Class C cement containing 2% CaCl and 1/2# floccelle per sack at TD of 2124' and WOC 2 1/2 hrs. Could not tag plug. Spotted 25 sacks at same depth and WOC 2 1/2 hrs. Tagged cement at 1590' and spotted 25 sacks cement, WOC 2 hrs. Tagged cement at 768'. Mixed and pumped 100 sacks cement and circulated 10 sacks to the pit. A dry hole marker was erected and the well was plugged and abandoned on 9/26/84.

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

SIGNED J. M. Zuehlke TITLE Regional Production Manager DATE 11-12-84

APPROVED BY [Signature] TITLE [Signature] DATE 11-26-84

CONDITIONS OF APPROVAL, IF ANY: