

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

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

Form C-103  
Revised June 10, 2003

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <b>301500959</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>ERS Resources LLC</b>		6. State Oil & Gas Lease No.
3. Address of Operator		7. Lease Name or Unit Agreement Name <b>Artesia Meter Unit</b>
4. Well Location Unit Letter <b>L</b> : <b>1980</b> feet from the <b>45</b> line and <b>660</b> feet from the <b>W</b> line Section <b>25</b> Township <b>18S</b> Range <b>27E</b> NMPM County <b>EDDY</b>		8. Well Number <b>45</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number
		10. Pool name or Wildcat <b>Artesia Guan Draining SA</b>

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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 type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. 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.

**Have hole in injection line, replace bad joint of pipe**

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

SIGNATURE **Bert Hanigan** TITLE **manager** DATE **10-14-04**  
Type or print name **Bert Hanigan** Email address: Telephone No. **885-6504**  
(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
Conditions of approval, if any:

Accepted for record - NMOCB

**OCT 28 2004**