Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resource	ces Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		WELL API NO. 30-005-60648
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISIO	5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE X
District IV – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOS	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO	
PROPOSALS.)	CATION FOR PERMIT" (FORM C-101) FOR SUCH	
1. Type of Well: Oil Well	Gas Well  Other	8. Well Number 2
2. Name of Operator	&P Company	9. OGRID Number
	&r Company	269864 10 P
3. Address of Operator	900, Dallas, Texas 75206	10. Pool name or Wildcat Twin Lakes San Andres
	Joo, Dallas, Texas 13200	I Will Lakes Sail Findles
4. Well Location Unit Letter K	1650 feet from the South line a	and 2310 feet from the West line
Section 25	Township 8S Range 28E 11. Elevation (Show whether DR, RKB, RT, C	
	3920.3 GR	SK, etc.)
	<u> </u>	
12 Check A	Appropriate Box to Indicate Nature of N	Notice Report or Other Data
		, .
NOTICE OF IN		SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON   REMEDIA	<del>_</del>
TEMPORARILY ABANDON 🛣	,	ICE DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/C	CEMENT JOB
DOWNHOLE COMMINGLE		
OTHER.	☐ OTHER:	П
		tails, and give pertinent dates, including estimated date
	ork). SEE RULE 19.15.7.14 NMAC. For Multi	
proposed completion or rec	ompletion	
Canyon proposes to temporar	ily abandon this well by placing a cast i	iron bridge plug @ 2467', which is 100' above it's
top perf. 35' of cement will l	be placed on top of the CIBP. The well	will be filled with KCL water and pressure tested
@500# for a period of 30 min	nutes	•
•	A status may be granted after a	a
	successful MIT test is performed	d.   RECEIVED
	Contact the OCD to schedule the	e test
	so it may be witnessed.	JUN <b>2 1</b> .2012
÷ .	LAST PROD 12/1/2001	8
		NMOCD ARTESI
G ID (	2.21	
Spud Date:	Rig Release Date:	
<u> </u>		
T1 1 (C 4 44) C C		
Thereby certify that the information	above is true and complete to the best of my known	owledge and belief.
, (		
SIGNATURE	TITLE—President	DATE 15 June 12
		· ·
Type or print name Mike Myers	E-mail address: mike@	canyonep.com PHONE: 214-709-6784
For State Use Only	•	
APPROVED BY: <b>Received IN</b>	THE COMPLIANCE	OFFICER DATE 6/22/12
Conditions of Approval (if any):	THE COMPANY	UPPOCIE DATE 1010712
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