

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

Form C-103
May 27, 2004

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

WELL API NO. <u>30-005-60332</u>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <u>NM 061P35</u>
7. Lease Name or Unit Agreement Name <u>South Lucky Lake Queen</u>
8. Well Number <u>TR. 7 #1 1-A</u>
9. OGRID Number 236040
10. Pool name or Wildcat <u>South Lucky Lake Queen</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>6.L. 3,844</u>
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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 ☐ Other ☐

2. Name of Operator
Lothian Oil Texas I, Inc.

3. Address of Operator
P.O. Box 450, 303 W. Main, Ste. 300, Artesia, N.M. 88210

4. Well Location
Unit Letter O : 660 feet from the South line and 1980 feet from the East line
Section 16 Township 15S Range 29E NMPM County Chavez

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
6.L. 3,844

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. 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 checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/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.

1-2-06

J&M Well Service, Tested Casing, Found Hole in Top
ST. OF 4 1/2. Backed OFF old ST. + replaced w/ New ST.
OF 4 1/2. RBIT w/ 2 3/8 plastic coated tubing + 2 3/8 x 4 1/2
Baker AD-1 packer. Tested to 300psi For 30 min, Held.
Need To Set up Test w/ Mr. Goye to witness,
Set Packer at 1678'

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Keith Zane TITLE Production Foreman DATE 2-6-06

Type or print name Casey Davidson E-mail address: cdavidson@aol.com Telephone No. 505-746-4448
For State Use Only

APPROVED BY: _____ TITLE Accepted for record - NMOCD DATE 2/6/06
Conditions of Approval (if any): _____