

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
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 S. St. Francis Dr.
Santa Fe, NM 87505

Form C-103
May 27, 2004

WELL API NO. 30-015-34885
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: ICE BOX 1823-30 STATE OOM
8. Well Number 1
9. OGRID Number 230387
10. Pool name or Wildcat FOUR MILE DRAW; WOLF CAMP

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other
2. Name of Operator PARALLEL PETROLEUM CORPORATION
3. Address of Operator 1004 N. BIG SPRING STREET, SUITE 400, MIDLAND, TEXAS 79701
4. Well Location Unit Letter 1 : 660' feet from the SOUTH line and 760' feet from the WEST line Section 30 Township 18S Range 23E NMPM County EDDY
11. Elevation (Show whether DR, RKB, RT, GR, etc.)
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 _____

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" 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.

6-13-06

RUN 9.625" CSG IN 12.25' HOLE, 36# SET @ 1400', OMT W/

LEAD #1: 180 SX CL H + 8% A10 + 9# LCM + 1% CLCL2, 14.6 PPG, 1.52 YIELD,

LEAD #2: 450 SX 50/50 POZ + 5% SALT + 1# LCM 11.6 PPG, 2.61 YIELD,

TAIL: 300 SX CL C, 2% CACL2, 2# LCM 14.8 PPG, 1.34 YIELD, 5 CENTRALIZERS, DID NOT CIRC, TEMP SURVEY

ATTACHED TOC @ 600', OMT TO SURF W/ 1"

WOC 6 HRS, TEST CSG TO 500 PSI FOR 30 MIN.

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 Kaye McCormick TITLE SR. PROD & REG TECH DATE 08/15/06

Type or print name KAYE MC CORMICK

E-mail address: kmccormic@plll.com
Telephone No. 432-685-6563

For State Use Only

APPROVED BY _____ TITLE _____ DATE 8/21/06

Conditions of Approval, if any: Accepted for record - NMOCD