

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

Form C-103
May 27, 2004

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

WELL API NO. 30-015-22925
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E 6018
7. Lease Name or Unit Agreement Name: STATE
8. Well Number 6
9. OGRID Number 018862
10. Pool name or Wildcat SHUGART

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		6. State Oil & Gas Lease No. E 6018
2. Name of Operator RAY WESTALL		7. Lease Name or Unit Agreement Name: STATE
3. Address of Operator BOX 4, LOCO HILLS, NM 88255		8. Well Number 6
4. Well Location Unit Letter C : 660 feet from the NORTH line and 1980 feet from the WEST line Section 2 Township 19 Range 31 NMPM County EDDY, NM		9. OGRID Number 018862
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3629-8 GL		10. Pool name or Wildcat SHUGART
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:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
CASING TEST AND CEMENT JOB <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.

10-6-06 Set 5 1/2" CIBP @3,375'. Cap w/35' cmt. w/Bailer.

10-9-06 Circulate hole with mud. Spot 40 sx. cmt. @2,600'. Tag plug @2,253'. Spot 25 sx. cmt. @854'. Tag plug @620'. Perf. 4 holes @60'. Pump 25 sx. cmt. down 5 1/2" to surface out of 8 5/8". Leave 5 1/2" full of cement.

10-10-06 Install Dry Hole Marker.

Approved as to plugging of the well bore. Liability under bond is retained until surface restoration, environmental remediation and final inspection is completed.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. If a below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a

SIGNATURE Randall Minear TITLE P & A SUPV. DATE 10-10-06

Type or print name RANDALL MINEAR

E-mail address:

Telephone No. 432-530-0907

For State Use Only

APPROVED BY Gerry Guye TITLE Deputy Field Inspector DATE OCT 20 2006

Conditions of Approval, if any: