

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.	30-015-35062
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	MESA ARRIBA
8. Well Number	4
9. OGRID Number	11181
10. Pool name or Wildcat	Undesig. Happy Valley (Bone Springs East)

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator THOMPSON, J. CLEO	
3. Address of Operator P.O. BOX 12577 ODESSA TX 79768-2577	
4. Well Location Unit Letter G : 1664' feet from the NORTH line and 1650 feet from the EAST line Section 10 Township 22-S Range 26-E NMPM County EDDY	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3195 GL	
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 ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☒

OTHER: ☐

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.

8-30-06 Run 147 jnts 5 1/2, 17#, J-55, 8rd, LT&C csg. Length 6,539.15, w/float Equip. 6,544', Casing Set @ 6,542', D.V. Tool @ 4,017', Top of Marker jnt @ 6,023.62, Float Collar @ 6,494.59, Run 25 centralizers, 16 Turbo CIRC, CMT 1st STAGE WITH 350 SKS "C" PD @ 1130
OPEN DV TOOL, CIRC " CIRC 50 SKS TO PIT ",
CMT 2nd STAGE WITH 475 SKS 35-65 POZ, 100 SKS " C-NEET "
CIRC 10 SKS TO PIT
ND BOP, SET SLIPS, CUT-OFF, JET PITS
RIG DOWN, WOC TIME : NONE
RIG RELEASED @ 11:30 PM 8-30-06

NOTE: MAILED C-103 AND DEVIATION REPORT ON 9/07/06.



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 Jim Stevens TITLE OPERATIONS MANAGER DATE 11/06/2006
Type or print name JIM STEVENS E-mail address: jctwest@nts-online.net Telephone No. (432)550-8887
For State Use Only

APPROVED BY: Accepted for record - NMOCD TITLE _____ DATE 11/14/06
Conditions of Approval (if any):