

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. 30-005-63657
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VA 2401
7. Lease Name or Unit Agreement Name: LOUISE YATES STATE
8. Well Number 3
9. OGRID Number 26307
10. Pool name or Wildcat WOLF LAKE SOUTH

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"/>	1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator JALAPENO CORPORATION	2. Name of Operator JALAPENO CORPORATION
3. Address of Operator P.O. Box 1608, Albuquerque, NM 87103	3. Address of Operator P.O. Box 1608, Albuquerque, NM 87103
4. Well Location Unit Letter N : 330 feet from the SOUTH line and 2310 feet from the WEST line Section 7 Township 9-S Range 28 E NMPM CHAVES County NM	4. Well Location Unit Letter N : 330 feet from the SOUTH line and 2310 feet from the WEST line Section 7 Township 9-S Range 28 E NMPM CHAVES County NM
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	11. Elevation (Show whether DR, RKB, RT, GR, etc.)
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	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 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 _____	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 type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND 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.

12-10-07 MIRU Basic P & A Rig #1273. Notify O.C.D.

12-11-07 Spot 25 sx. cnt. @2,319'. W.O.C.

12-12-07 Tag T.O.C. @2,065'. Pull up hole to 1,667'. Spot 30 sx. cnt. W.O.C. & tag @1,390'. Pull tbg. to 495'. Spot 40 sx. cnt. W.O.C.

12-13-07 Tag T.O.C. @179'. Fill csg. 100' to surface w/10 sx. cnt. R.D. M.O.

Approved for plugging of well bore only.  
Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under forms. www.emnrd.state.us/oed

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 Randall Minear TITLE P & A SUPV. DATE 12-14-07

Type or print name RANDALL MINEAR E-mail address: \_\_\_\_\_ Telephone No. 432-530-0907

For State Use Only

APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE 1/8/08

Conditions of Approval, if any: