

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
June 19, 2008

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
AUG 19 2008 Santa Fe, NM 87505

OCD-ARTESIA

WELL API NO. 30-015-0787-02787
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM 037777 (4)
7. Lease Name or Unit Agreement Name LEVERS
8. Well Number 003 X
9. OGRID Number 14070
10. Pool name or Wildcat GRAYBURG JACKSON
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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
MARKS + GARNER Production LTD
3. Address of Operator
P.O. Box 1089
4. Well Location
Unit Letter N : 336 feet from the SOUTH line and 1990 feet from the WEST line
Section N 33 Township 16S Range 24E NMPM County Eddy

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 ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

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

OTHER: ☐

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.

Replaced MOTOR ON PUMPING UNIT, Replaced
Flowline, Placed back ON PRODUCTION 9-3-2007

ACCEPTED FOR RECORD

AUG 19 2008

Gerry Guye, Deputy Field Inspector
NMOCD-District II ARTESIA

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Quinton Welborn TITLE CONTROLLER DATE 8-18-08
Type or print name Quinton Welborn E-mail address: QWELBORN@DUALON.net.com PHONE: 505-343-9358
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any):