

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



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

AUG 26 2008
OCD-ARTESIA Form C-103
May 27, 2004

WELL API NO. 30-015-30027
5. Indicate Type of Lease X FEDERAL STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Parkway Delaware Unit
8. Well Number PDU # 703
9. OGRID Number 154903
10. Pool name or Wildcat Parkway; Delaware

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 X Other Water Injector	
2. Name of Operator St. Mary Land & Exploration	
3. Address of Operator 3300 N. A St., Bldg 7, Suite 200, Midland, TX 79705	
4. Well Location Unit Letter I : 2610 feet from the South line and 430 feet from the East line Section 35 Township 19S Range 29E NMPM Eddy County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3346' RKB	
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	PLUG AND ABANDON X	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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/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.

Parkway Delaware Unit #703
Proposed P&A Procedure

RIH w/tbg to 1950' (if possible) and spot 25 sx plug. If you cannot get to 1950' notify Mike Bratcher @
OCD of deepest depth reached for approval to cmt from that depth. The OCD would like the stub plug to

- 1) reach at least 50' above the csg stub. *← TAG & Note by OCD*
- 2) POH w/tbg. RIH w/CIBP on tbg to 1550'. Set CIBP and test to 500#.
- 3) Pump cmt plug from the CIBP to at least 1400' (52' above DV tool). Tag If necessary to confirm TOC.
- 4) PUH to 402' and pump cmt sufficient to have a 100' plug. *← Min 25 sx or 100'*
- 5) PUH and Mix/pump surface plug from 60' to surface.

provide BLM Notification of Plugging

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 *Donna Huddleston* TITLE Production Tech DATE 08/25/2008

Type or print name Donna Huddleston E-mail address: dhuddleston@stmaryland.com Telephone No. 432-688-1789

For State Use Only

APPROVED BY: Signed By *Mike Bratcher* TITLE

DATE AUG 25 2008

Conditions of Approval (if any):