

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Central Ave., Artesia, NM 88210
District III
1000 Rio Bravo 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

SEP - 8 2008

Form C-103
May 27, 2004

OCD ARTESIA
WELL ARTESIA

3001510450

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

30827

7. Lease Name or Unit Agreement Name

Adkins N. 1/4

8. Well Number

9. OGRID Number

009759

10. Pool name or Wildcat

GB SA

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

H. DWANE PARRISH JR

3. Address of Operator

1306 S. 9th Artesia NM 88214

4. Well Location

Unit Letter D : 10 feet from the South line and 2577 feet from the East line

Section 17 Township 18 S Range 28 E NMPM County ESQ

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness _____ mll Below-Grade Tank: Volume _____ mll; 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 ☐

Notify OCD 24 hrs. prior
to any work done.

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.

This well has 8 5/8 casing to 524 ft. cemented with 150 ss
4 1/2" casing to 2460 cemented with 150 ss

Perts start at 2005 ft. Plan to run 1960 ft tubing o/d 1 3/8
pump min 100 ft plug. tag

Run 575 ft tubing full remainder of hole with cement
set mark clean location

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 NMSD/CDD regulations ☐ as a general permit ☐ or as (attached) alternative OCD-approved plan ☐.

SIGNATURE Phil Harker TITLE owner DATE 9/10/08

Type or print name
For State Use Only

E-mail address:

Telephone No.

APPROVED BY: Phil Harker TITLE Compliance DATE 9/10/08

Conditions of Approval (if any):

Approval Granted providing work
is complete by 12/10/08