

OCT 14 2008

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

OCD-ARTESIA

Form C-103
 May 27, 2004

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.)		WELL API NO. 30-015-20184
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Water Injection		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CBS Operating Corp.		6. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 2236 Midland TX 79702		7. Lease Name or Unit Agreement Name North Square Lake Unit
4. Well Location Unit Letter <u>E</u> : <u>2630</u> feet from the <u>north</u> line and <u>10</u> feet from the <u>west</u> line Section <u>31</u> Township <u>16S</u> Range <u>31E</u> NMPM Eddy County NM		8. Well Number <u>142</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3810' GR</u>		9. OGRID Number 216852
Fit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Square Lake GB SA
Fit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Fit 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: MIT ☒

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.

10-3-2008 - Contacted NMOCD to run TA well MIT test for instructions.

Pressure tested well to 500# held for 30 minutes.

Chart attached per NMOCD instructions.

Temporary Abandoned Status approved
 and 10-31-2009

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 W. A. Sirgo III TITLE Engineer DATE 10-9-2008

Type or print name M. A. Sirgo, III

E-mail address mastres@aol.com Telephone No. 432-685-0878

For State Use Only

APPROVED BY: Ruthann Inas

TITLE COMPLIANCE OFFICER

DATE 10-28-08

Conditions of Approval (if any):

