

MAR 16 2009

Form C-103
May 27, 2004

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

WELL API NO. 30-005-60330
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name O'BRIEN C
8. Well Number 004
9. OGRID Number 21637
10. Pool name or Wildcat CHAVES UNDESIGNATED; PENN GAS

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
STEVENS OPERATING CORP.

3. Address of Operator
P.O. BOX 2203 ROSWELL, NM 88201

4. Well Location

Unit Letter L : 1980 feet from the SOUTH line and 745 feet from the WEST line
Section 1 Township 9S Range 28E NMPM County CHAVES, NM

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: _____ 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: ☐

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.

SEE ATTACHMENT

OK TO REUSE.

Equipment has been removed

3-23-09

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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE agent for ocd DATE 3/19/09

Type or print name
For State Use Only

E-mail address:

Telephone No.

APPROVED BY: [Signature]
Conditions of Approval (if any):

TITLE COMPLIANCE OFFICER DATE 3/20/09

MAYO MARRS CASING PULLING INC.
BOX 863
KERMIT, TEXAS 79745

30-005-60336

NM0CD

Lease: STEVENS OPERATING O'BRIEN^C #4
Project P & A

10/10/2007

SPOT 35 SACKS @ 6652' - TAG @ 6568'
SPOT 25 SACKS @ 3203'
SPOT 25 SACKS @ 2732'

10/11/2007

SPOT 25 SACKS @ 2020' - TAG @ 1736'

10/12/2007

CUT CASING @ 1571' DID NOT MOVE
SPOT 25 SACKS @ 1632' - TAG @ 1189'

10/15/2007

CUT CASING @ 975' DID NOT MOVE
SPOT 25 SACKS @ 1038' - TAG @ 814'
CIRCULATE 15 SACKS FROM 60' TO SURFACE

PUMPED PLUGGING MUD BETWEEN ALL PLUGS
INSTALLED DRY HOLE MARKER