

Submit 3 Copies To Appropriate District
Office
District I
1625 N French Dr., Hobbs, NM 87240
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

SEP 15 2009

Form C-103
May 27, 2004

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

WELL API NO. 30-005-62315
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 019193
7. Lease Name or Unit Agreement Name: CX PLAINS
8. Well Number 020
9. OGRID Number 143199
10. Pool name or Wildcat RACE TRACK SAN ANDRES

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3,751' - GR

Pit or Below-grade Tank Application ☐ or Closure ☒

Pit type STEEL 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 *NONE WITHIN 1,000'

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator ENERVEST OPERATING, L.L.C. ATTN: BRIDGET HELFRICH
3. Address of Operator 1001 FANNIN STREET, SUITE 800, HOUSTON, TEXAS 77002	4. Well Location Unit Letter <u>J</u> : <u>1,650</u> feet from the <u>SOUTH</u> line and <u>2,310</u> feet from the <u>EAST</u> line Section <u>019</u> Township <u>10S</u> Range <u>28E</u> NMPM County <u>CHAVES</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,751' - GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input checked="" type="checkbox"/>	
Pit type <u>STEEL</u> 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 <u>*NONE WITHIN 1,000'</u>	

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
OTHER <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
CASING TEST AND CEMENT JOB <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.

09/09/09: PU WORKSTRING X RIH X TAG EXISTING CIBP + CMT. @ 2,120'; CIRC. WELL W/ PXA MUD; MIX X PUMP A 25 SX. CMT. PLUG @ 1,710'-1,460' (CALC.).
09/10/09: PERF. X SQZ. A 30 SX. CMT. PLUG @ 1,125'; WOC & TAG TOP OF CMT. PLUG @ 1,065'; MIX X PUMP A 30 SX. CMT. PLUG @ 1,065'; WOC X TAG TOP OF CMT. PLUG @ 866'; PERF. X SQZ. AN 85 SX. CMT. PLUG 475'; WOC & TAG CMT. PLUG @ 209'.
09/11/09: PERF. X CIRC. TO SURF. A 40 SX. CMT. PLUG @ 150'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD ON 1/2" STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER.
WELL PLUGGED AND ABANDONED 09/11/09.

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

SIGNATURE David A. Eyler TITLE AGENT DATE 09/14/09

Type or print name DAVID A. EYLER

E-mail address: DEYLER@MTIACRO-RES.COM

Telephone No. (432) 687.3033

For State Use Only

APPROVED BY Phyllis Hank TITLE _____

Conditions of Approval, if any:

Approved for plugging of well bore only.
Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under DATE 9/17/09
Form #: www.emnrd.state.nm.us/oed.