Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103 October 13, 2009	
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		3001537744 5. Indicate Typ	e of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505		STATE	FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	·		6. State Oil & Gas Lease No. Federal Lease – LC057798	
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			7. Lease Name or Unit Agreement Name Magruder	
PROPOSALS.)  1. Type of Well: Oil Well X Gas Well Other			8. Well Number 19	
2. Name of Operator Joe L. Tarver			9. OGRID Number 37594	
3. Address of Operator			10. Pool name or Wildcat	
12403 CR 2300, Lubbock, TX 79423			Yates-Seven Rivers	
4. Well Location	1610			
Unit Letter: _ East line	1610feet from the	South li	ne and <u>1645</u>	feet from the
Section 35	Township 17S	Range 27E	NMPN	M EDDY County
	11. Elevation (Show whether DR			
12. Check A	ppropriate Box to Indicate N	lature of Notice,	Report or Othe	er Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK				ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI		P AND A
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL	CASING/CEMENT	T JOB	
OTHER: Request for Variance of re	quirement	OTHER:		
13. Describe proposed or compl	eted operations. (Clearly state all probability). SEE RULE 19.15.7.14 NMAC ompletion.			
Please consider this request for va	riance of requirement for deviation	n survey because of	shallow well 540'	from surface
				RECEIVED
				NOV <b>2 3</b> 2010
				NMOCD ARTESIA
				NINOCE ALLESIN
Spud Date:	Rig Release Da	nto:		
Spud Date.	Mig Release De	ate.		
I hereby certify that the information a	bove is true and complete to the b	est of my knowledge	e and belief.	
SIGNATURE SEE	TITLE Ope	erator	DATE	11-17-2010
Type or print name Joe L. Tarver For State Use Only	E-mail addres	ss: joe @wirelessto	wlights.com PHC	DNE: <u>806-795-2042</u>