Submit 3 Copies to Appropriate District Office

State of New Mexico gy, Minerals and Natural Resources Departme

Form C-103 Revised 1-1-89

FEE

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

PO Box 2088

| 1 .O. DOX 2000 | | | |
|----------------|-----|--------|------------|
| Santa Fe, | New | Mexico | 87504-2088 |

WELL API NO. 30-005-60947 5. Indicate Type of Lease STATE

| DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 | 6. State Oil & Gas Lease No. |
|---|---|
| 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.) | 7. Lease Name or Unit Agreement Name Grynberg-State |
| 1. Type of Well: Ol. GAS WELL OTHER | 8. Weil No. |
| 2. Name of Operator VIKING PETroleum Inc. 74105 3. Address of Operator | |
| 3700 Center Blog. 276/ E Skelly Dr lulsu Ok 4. Well Location Unit Letter A :330 Feet From The N Line and 33 | Und Chisum SH SO Feet From The E Lin |
| Section 12 Township // Range 27 | NMPM Chaves County |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) | |
| 11. Check Appropriate Box to Indicate Nature of Notice, I NOTICE OF INTENTION TO: SU | Report, or Other Data BSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK | ALTERING CASING |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLIN PULL OR ALTER CASING CASING CASING TEST AND C | r1 |
| OTHER: OTHER: | |
| 12 Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, incowork) SEE RULE 1103. (1) Spot 35 Sx @ 2107. WOC + tag plug @ 1 | cluding estimated date of starting any proposed |
| (2) Load hole W/mud. | Port ID-2 |
| (3) Spot 35 SX @ 1/25 | 3-1-96 |
| (5) CORT 355X @ 502 | P+A |
| (2) 1 to 2/44 & 3851 | - |
| 1) Spot 10 SX & Surtace | |

| I hereby certify that the information above is true and complete to the best of my knowledge | ge and belief. |
|--|---|
| SIGNATURE Kay MILL | me Deputy Chil + Cas Inspectes DATE 2-36-96 |
| 0 < 11 | THE 1283 |
| TYPE OR PRINT NAME (Qy) MITH | |
| $m{\iota}$ | |

(This space for State Use)

APPROVED BY Kay CONDITIONS OF APPROVAL F ANY: ma Deputy Cit & Sas Inspector DATE 2-26-86