

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                        |                                     |
|------------------------|-------------------------------------|
| NO. OF COPIES RECEIVED |                                     |
| DISTRIBUTION           |                                     |
| SANTA FE               |                                     |
| FILE                   | <input checked="" type="checkbox"/> |
| U.S.O.S.               |                                     |
| LAND OFFICE            |                                     |
| OPERATOR               | <input checked="" type="checkbox"/> |

OIL CONSERVATION DIVISION  
P. O. BOX 2038  
SANTA FE, NEW MEXICO 87501  
APR 2 1984  
O. C. D.  
ARTESIA, OFFICE

Form C-103  
Revised 12-1-78

5a. Indicate Type of Lease  
State ☒ Fee ☐  
5. State Oil & Gas Lease No.  
STA-NM-LG-564

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)

|                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-<br>2. Name of Operator<br>JACK J. GRYNBERG<br>3. Address of Operator<br>5000 SOUTH QUEBEC, SUITE 500, DENVER, CO 80237<br>4. Location of Well<br>UNIT LETTER D 660' FEET FROM THE North LINE AND 1980' FEET FROM THE West LINE, SECTION 4 TOWNSHIP 5 S RANGE 24 E NMPM. | 7. Unit Agreement Name<br>N/A<br>8. Farm or Lease Name<br>Horse Creek State "COM"<br>9. Well No.<br>#2<br>10. Field and Pool, or Wildcat<br>Und. Pecos Slope Abo<br>11. Elevation (Show whether DF, RT, GR, etc.)<br>3390.5' GL<br>12. County<br>Chaves |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

| NOTICE OF INTENTION TO:                        |                                           | SUBSEQUENT REPORT OF:                               |                                                         |
|------------------------------------------------|-------------------------------------------|-----------------------------------------------------|---------------------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>              | ALTERING CASING <input type="checkbox"/>                |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>    | PLUG AND ABANDONMENT <input type="checkbox"/>           |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOB <input type="checkbox"/> | OTHER 30 Day Report <input checked="" type="checkbox"/> |

17. 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.

3/31/84 SI waiting on pressure build up.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED CHRIS PENNELS TITLE DRILLING & PRODUCTION COORDINATOR DATE 4/19/84

Original Signed By  
Leslie A. Clements  
Supervisor District II

APPROVED BY \_\_\_\_\_ DATE APR 24 1984

CONDITIONS OF APPROVAL, IF ANY: