Submit 3 Copies to Appropriate District Office

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

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

C15F

Form C-103
Revised 1-1-89

WELL API NO.
30-005-62351

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.
19193

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.)

RECEIVED
OCD - ARTESIA

7. Lease Name or Unit Agreement Name
CX Plains

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
Melvin or Kathleen Turnbow

8. Well No.
7

3. Address of Operator
1724 W. 18th St Portales, NM 88130

9. Pool name or Wildcat
Race Track San Andres

4. Well Location
Unit Letter O : 330 Feet From The South Line and 2310 Feet From The East Line

Section 19 Township 10-S Range 28-E NMPM Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☒	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER:	☐			OTHER:			☐

12. 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.

1. 320 feet of casing will remain in place

2. open casing will be capped with a bull plug to prevent rain water from entering the bore hole

Denied. Plug well to surface using following procedure.

1. Load hole with brine gel.
2. Spot 25sx cement Plug 1600' - 1385'
3. Spot 25sx cement Plug 1102' - 1002'.
4. Spot 45sx cement Plug 365' - 265' TAG
5. 10sx cement surface Plug.

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

SIGNATURE Kathleen Turnbow TITLE owner/operator DATE 9/19/00

TYPE OR PRINT NAME Kathleen Turnbow TELEPHONE NO. 505-356-3755

(This space for State Use)

APPROVED BY Mac Stubblefield TITLE Field Rep. II DATE 9/26/2000

CONDITIONS OF APPROVAL, IF ANY:

* Notifie NMOCD To witness Plugging Operations.