

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87504

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87504

Form C-103
Revised March 25, 1999

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.)		WELL API NO. <u>30-005-62102</u>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Injection</u>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <u>M. E. W. Enterprise</u>		6. State Oil & Gas Lease No.
3. Address of Operator <u>300 South Kentucky Roswell, N.M. 88203</u>		7. Lease Name or Unit Agreement Name: <u>Marlissue Queen Unit</u>
4. Well Location Unit Letter <u>G</u> : <u>2620</u> feet from the <u>North</u> line and <u>2025</u> feet from the <u>East</u> line Section <u>24</u> Township <u>14S</u> Range <u>29E</u> NMPM County <u>Chaves</u>		8. Well No. <u>007</u>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3811 GR</u>		9. Pool name or Wildcat <u>Double L Queen</u>

11. 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: <u>Casing test</u> <input checked="" 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 type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Load & Test casing, Resume Injection

Please notify me as soon as you have available data
for you to witness

Please call Darryl Dwyer 098-1232

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

SIGNATURE Russell White TITLE owner DATE 01-29-01

Type or print name Russell White Telephone No. 505-627-2065
(This space for State use)

APPROVED BY Mrs. Stillefield TITLE Field Rep. II DATE 2/27/01
Conditions of approval, if any: