

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

WELL API NO. 30-015-02729-02686
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. LC 061638
7. Lease Name or Unit Agreement Name: E. High Lonesome Federal
8. Well No. 8
8. Pool name or Wildcat High Lonesome Queen

**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.)

1. Type of Well:  
Oil Well ☐ Gas Well ☐ Other Water Injection

2. Name of Operator  
Vintage Drilling LLC

3. Address of Operator  
P.O. Box 158 Loco Hills, NM 88255

4. Well Location  
Unit Letter P : 660 feet from the South line and 660 feet from the East line  
Section 11 Township 16S Range 29E NMPM Eddy County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3728 BF

11. 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"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: Repair casing <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.

Well failed MIT test.  
Ran 4 1/2 in. 9.5 # liner and circulated to surface  
Tested casing to 300# for 15 minutes. Tested OK.  
Chart to NMOCCD.



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

SIGNATURE Marie Durham TITLE Secretary DATE 11/28/00

Type or print name Marie Durham Telephone No. 505-748-2941

(This space for State use)

APPROVED BY Benny Bury TITLE Field Rep 1 DATE 12-11-00  
Conditions of approval, if any:

SEVEN

FIFTH

FOURTH

NOV 2000  
RECEIVED  
OCD - ARTESIA

WNV 2030

~~RECEIVED~~

~~SECRET~~  
OCD - ARTESIA

**NON OFFER**

IN WATER

TWELFTH

THIRTEEN

RECEIVED

DELLA  
1904

OK  
chart plot 0000  
Pom Oil 10:00 AM  
P.O. Co. 10:00 AM  
Tampa  
Jintag Lone E  
Hig 28