

Submit 3 Copies To Appropriate District Office

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

clsf
hp

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>04844</u> <u>30-015-87365</u>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <u>AGHORN OPERATING, Inc.</u>		6. State Oil & Gas Lease No. <u>NM 04421</u>
3. Address of Operator <u>P.O. Box 12663 ODESSA TEXAS 79768</u>		7. Lease Name or Unit Agreement Name: <u>Northeast Square Lake Unit</u>
4. Well Location Unit Letter <u>H</u> : <u>1980</u> feet from the <u>North</u> line and <u>990</u> feet from the <u>EAST</u> line Section <u>10</u> Township <u>16S</u> Range <u>31E</u> NMPM County <u>EDDY</u>		8. Well No. <u>22</u>
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. Pool name or Wildcat <u>NE Square Lake</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: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input checked="" 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"/>

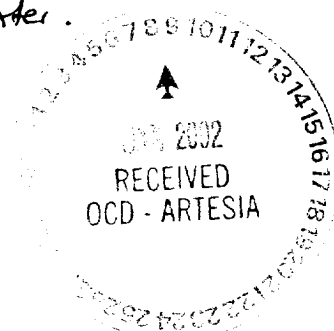
12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Return well to production.
Poot w/ rods, pump and tubing.
Pressure test tubing in hole. Okay.
Rth w/ pump and rods. Hot oil well with 50 bbls hot water.
Test flowline to 300 psi.
Clean location.

[Signature]

[Signature]

1-11-02



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

SIGNATURE Frosty Williams, Jr. TITLE President DATE 11/30/01

Type or print name Frosty Williams, Jr. Telephone No. 915 550 0804
(This space for State use)