

N.M. Oil Cons. D. - Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

c/SP

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NMLC056302B
2. Name of Operator GP II Energy, Inc /	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. PO Box 50682, Midland, Texas 79710 (915) 684-4748	7. If Unit or CA, Agreement Designation NMNM101360X
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) UL: "C", Sec: 34, T-16S, R-31E	8. Well Name and No. North Square Lake Unit 114
	9. API Well No. 30-015-10271-00-00
	10. Field and Pool, or Exploratory Area SQ Lake Grayburg SA
	11. County or Parish, State Eddy

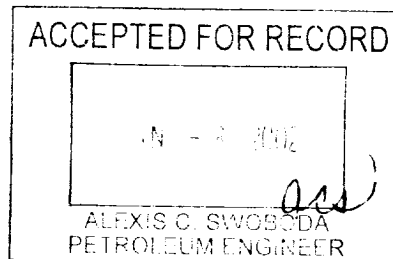
CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input checked="" type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Compliance
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

11/01/2001 Replaced Well Sign.
Well in Compliance for Rule 103.

11/01/2001 Changed out stuffing box packing. Leak fixed at well head.



I hereby certify that the foregoing is true and correct

Signed [Signature] Title Agent

Date 12-11-01

Approved by [Signature] Title _____
Conditions of approval, if any: _____

JAN 16 2002