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
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO.

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name: Thigpen

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

8. Well No. 1-Y

2. Name of Operator: Otis H. Sanders

9. Pool name or Wildcat: Wildcat Wolfcamp

3. Address of Operator: P.O. Box 1778 Roswell, N.M. 88202

4. Well Location
Unit Letter F : 1800 Feet From The North Line and 1980 Feet From The West Line

Section 7 Township 16 Range 25 NMPM 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 Kill well with mud + brine water
② Pooh w/ tbg
③ RIH w/ CIBP on w/l + set @ 4610' + cap w/ 35' of cmt
④ Spot 25 sx plug @ 3717'
⑤ Spot 25 sx plug @ 1265'
⑥ RIH w/ Gun + tag plug @ 932'
⑦ Pull to 900' + perforate 5½ csg.

Post I D-2
4-26-96
P+A

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

SIGNATURE Ray Smith TITLE Deputy Oil & Gas Inspector DATE 4-9-96

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY Ray Smith TITLE Deputy Oil & Gas Inspector DATE 4-9-96

CONDITIONS OF APPROVAL, IF ANY: