

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                        |   |
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|                                                                        |
|------------------------------------------------------------------------|
| 5a. Indicate Type of Lease                                             |
| State <input type="checkbox"/> Fee <input checked="" type="checkbox"/> |
| 5. 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 DEPTH. USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                              |                                                                                                    |                                                                                                                                                                                                   |                                                                                                     |                              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------|
| 1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-                                                                                                                                                                                                                                                                                                                                                                                                       | 2. Name of Operator<br><b>John R. Parish</b> | 3. Address of Operator<br><b>c/o Oil Reports &amp; Gas Services, Inc. Box 763, Hobbs, NM 88230</b> | 4. Location of Well<br>UNIT LETTER <b>D</b> <b>330</b> FEET FROM THE <b>North</b> LINE AND <b>330</b> FEET FROM <b>West</b> LINE, SECTION <b>22</b> TOWNSHIP <b>16S</b> RANGE <b>26E</b> N.M.P.M. | 5. Indicate Type of Lease<br>State <input type="checkbox"/> Fee <input checked="" type="checkbox"/> | 6. State Oil & Gas Lease No. |
| 10. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                              |                                                                                                    |                                                                                                                                                                                                   | 11. County<br><b>Eddy</b>                                                                           |                              |
| 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"/><br>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/><br>PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/> CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> |                                              |                                                                                                    |                                                                                                                                                                                                   |                                                                                                     |                              |
| 15. Elevation (Show whether DT, RT, GR, etc.)<br><b>3355.8 GR</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                              |                                                                                                    |                                                                                                                                                                                                   |                                                                                                     |                              |

17. 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.

Spud 5:20 PM 12/20/81. Cemented 13 3/8" 53# H-40 casing at 410' with 400 sacks class "C" cement. Circulated 110 sacks. Plug down 8:30 PM 12/21/81. WOC 18 hours, tested casing with 500# for 30 minutes, test O.K.

Cemented 8 5/8" 24# J-55 casing at 1098 with 600 sacks class "C" cement. Circulated 100 sacks. Plug down 11:30 PM 12/25/81. WOC 36 hours, tested casing with 1000# for 30 minutes, test O.k.

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

|                                         |                                    |                        |
|-----------------------------------------|------------------------------------|------------------------|
| SIGNED <u><i>Harold D. Hall</i></u>     | TITLE <u>Agent</u>                 | DATE <u>12/29/81</u>   |
| APPROVED BY <u><i>Mike Williams</i></u> | TITLE <u>OIL AND GAS INSPECTOR</u> | DATE <u>JAN 5 1982</u> |
| CONDITIONS OF APPROVAL, IF ANY:         |                                    |                        |