

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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

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

SEP 13 1996

WELL API NO.

30-015-2876

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

NMNM84634

7. Lease Name or Unit Agreement Name

Red Lake Unit

8. Well No.

26

9. Pool name or Wildcat

Red Lake (Queen Grayburg), East

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

2. Name of Operator

Beach Exploration, Inc. #1903 ✓

3. Address of Operator

800 N. Marienfeld Ste. 200 Midland, Texas 79701

4. Well Location

Unit Letter B : 163 Feet From The North Line and 2118 Feet From The East Line

Section 36

Township

16S

Range 28E

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3702 GL

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☒ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

Beach Exploration, Inc. preparing to move in and rig to spud well Friday, September 13th or as soon as possible depending on weather conditions. United Drilling Co. of Artesia is drilling contractor.

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

SIGNATURE Barbara Watson TITLE Production DATE 9-12-96

TYPE OR PRINT NAME Barbara Watson

TELEPHONE NO. 915/683-6226

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM  
EXCISE A STAMP FOR

APPROVED BY SEP 16 1996 DATE

CONDITIONS OF APPROVAL, IF ANY: