| Submit 3 Copies To Appropriate District State of New Mexico | Form C-103 |
|--|-----------------------------------|
| Office District I 1638 N. French Dr. Hobbs NM 88240 Energy, Minerals and Natural Resources WELL API NO. 2 | Revised March 25, 1999 |
| 1025 N. French Dr., Houds, NW 66240 | 0-015-31831 |
| 811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION 5. Indicate Type of | |
| District III 1220 South St. Francis Dr. STATE State, NM 87410 | FEE 🗆 |
| District IV Salita Fe, INIVI 87303 6. State Oil & Ga | 1 |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | Jnit Agreement Name: |
| (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: | - 1 |
| Oil Well Gas Well Other 2. Name of Operator 8. Well No. | |
| 3. Address of Operator POBOX 1534 APT STAY WM 98211 9. Pool name or W | ildcat |
| 4. Well Location | SEVEN KIVERS |
| Unit Letter M: 330 feet from the South line and 983 feet from | the WEST line |
| Section 16 Township 175 Range 28E NMPM | County Eddy |
| 10. Elevation (Show whether DR, RKB, RT, GR, etc.) | |
| 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other I | Data Data |
| NOTICE OF INTENTION TO: SUBSEQUENT REF PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK | ORTOF: ALTERING CASING □ |
| TEMPORARILY ABANDON | PLUG AND ABANDONMENT |
| PULL OR ALTER CASING | |
| OTHER: OTHER: | |
| 12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram or recompilation. SPADDED WELL ON 8/2401 WITH | CAULE |
| Tool Deilling Rice. | OCO ARTESIA |
| | 31-123456 |
| | 1 80 |
| | |
| | CD CCELLOT |
| | APICO II |
| | 5/4 2 |
| | 1,91,7 |
| | 2026181 LK |
| | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE TITLE | DATE 9/6/6/ |
| SIGNATURE Journey TITLE OFERATOR | _DATE_9/6/8/ hone No. 748-3993 |
| SIGNATURE Journey TITLE OFFRICTION | 700 700 |