Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources			ash	Form C-103 Revised March 25, 1999
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minorals and Patental Property			WELL API NO.	30-015-20704
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.			5. Indicate Type of Lease STATE FEE	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505				Gas Lease No.
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	The state of the s				
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-191) FOR SUCH TO PROPOSALS.)				7. Lease Name or Unit Agreement Name: Lea "C"	
1. Type of Well:	Other Injection	125	RECEIVE		
Oil Well Gas Well 2. Name of Operator	Other Injection	3 90	O - ARTES	8. Well No.	‡ 13
Westbro	ok Oil Corporation			0 Pool name or	Wildcat Grayburg
3. Address of Operator	2264 – Hobbs NM_	8824	42264 مرار ^{ي)}	Jackson 7-R	vrs-QN-GB-SA
4. Well Location	2204 10000 141	002-42	WELCO.		
Unit Letter P:_	660 feet from the	South	line and	660 feet fr	om the <u>East</u> line
	Township 17	S Rai	nge 31E	NMPM Edd	y County NM
Section 11 Township 175 Range 31E NIVII VI Eddy County HII 10. Elevation (Show whether DR, 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			REMEDIAL WOR	к 🗆	ALTERING CASING [
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DR	ILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION		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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.					
 Requesting an extension of TA Status, until can be put on 					
permanent producing status.					
Temporary Abandoned Status approved					
unti 10-15-07					
\wedge					
A land 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	<u>1</u> T	TTLE	Sec/Treas		DATE 10/28/02
Type or print name Barbara	Wolfe			1 ele	ephone No. 505-393-9714
(This space for State use)	000		1-11	1 7	D. 1997
APPPROVED BY	T	ITLE_	July ;	Sept 1	DATE