| Submit 3 Copies<br>to Appropriate<br>District Office  | State of New Mexico<br>Energy, Minerals and Natural Resources Department |   |                          |   | Form C 103<br>Revised 1-1-89            |  |
|---|--|---|--------------------------|---|---|--|
| DISTRICT I  | OIL C  | ONSERVATIO  | ON DIVISION              | WELL API NO.  |   |  |
| P.O. Box 1980, Hobbs, NM S8240<br>STG 1050 P.O. Box 2088  |  |   |                          |   | 015 01783                               |  |
| DISTRICT II<br>P.O. Drawer DD, Artesia, NM 88210-RTESIA<br>Santa Fe, New Mexico 87504-2088  |  |   |                          | 5. Indicate Type of L   |   |  |
| DISTRICT III<br>1000 Rio Brazos Rd., Aztec, NM 87410  |  |   |                          | 6. State Oil& Gas Le  |   |  |
| ( DO NOT USE THIS FORM F<br>DIFFERENT   | OR PROPOSALS TO<br>RESERVOIR. USE  | REPORTS ON WE<br>DRILL OR TO DEEPEI<br>"APPLICATION FOR PE<br>UCH PROPOSALS.) | N OR PLUG BACK TO A      | 7. Lease Name or Unit   | Agreement Name                          |  |
| 1. Type of Well:<br>Oil NZ Ga   |  |   |                          |   |   |  |
| Well         W           2. Name of Operator         W  |  |   |                          |   | Artesia Unit                            |  |
| Melrose Operating Company   |  |   |                          | 34  |   |  |
| 3. Address of Operator<br>c/o P.O. Box 953, Midlar  | nd, TX 79702   |   |                          | 9. Pool name or Wild<br>Artesi  | cat<br>a; QN-GR-SA                      |  |
| 4. Well Location Unit LetterB   | 330 Feet Fro   | m The North   | Line and2                | 310 Feet From Th  | ne East Line                            |  |
|   | root no  |   |                          | rectrom m   |   |  |
| Section 2   | Townshi  |   | lange 28E                |   | Eddy County                             |  |
| ///////////////////////////////////////   | 1  | 0. Elevation (Show whethe   | r DF, RKB. RT, GR, etc.) | ///////////////////////////////////////   | /////////////////////////////////////// |  |
| <ul> <li>TEMPORARILY ABANDON</li> <li>PULL OR ALTER CASING</li> <li>OTHER:</li> <li>12. Describe Proposed or Completion work) SEE RULE 1103.</li> <li>Copy of prior filing attached.</li> <li>10-19-01: MIRU, TOH with 1 hole with hot water and parafil</li> </ul> | leted Operations (C/e  | arly state all pertinent detail<br>t pull rod. TOH with t                     | tubing, lower joints pa  | EMENT JOB<br>ck on production<br>including estimated date of st<br>cked with paraffin. TI |   |  |
| 10-22-01: Good pump action,<br>Violation Date on "Enforcem  |  |   |                          | uction to resolve viola   | ition.                                  |  |
| I hereby certify that the information ab  | ny is tous and complete to   | o the best of my knowledge and  | d belief.                |   |   |  |
| SIGNATURE   | Takking_   | TI  | TLE Regulatory Agent     |   | DATE 1-21-03                            |  |
| TYPE OR PRINT NAME ANN E. RITC  | chie   |   |                          |   | TELEPHONE NO. 915 684-6381              |  |
| (this space <i>for</i> State Use)   | week free recurci - h  | SMC ACO   |                          |   |   |  |
| APPROVED BY   |  | TI  | TLE                      |   | DATE                                    |  |
| CONITIONS OF APPROVAL, IF ANY   |  |   |                          |   |   |  |