

+Submit 3 Copies  
to Appropriate  
District Office

DISTRICT I  
P.O. Box 1980 Hobbs, NM 88240  
DISTRICT II  
P.O. Drawer 100 Artesia, NM 88218  
DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C 103  
Rev. sed 1-1-89

DSF

WELL API NO.	02054 30 015 20254
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	State 647 AC 711
8. Well No.	100
9. Pool name or Wildcat	Artesia; QN-GR-SA

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.)

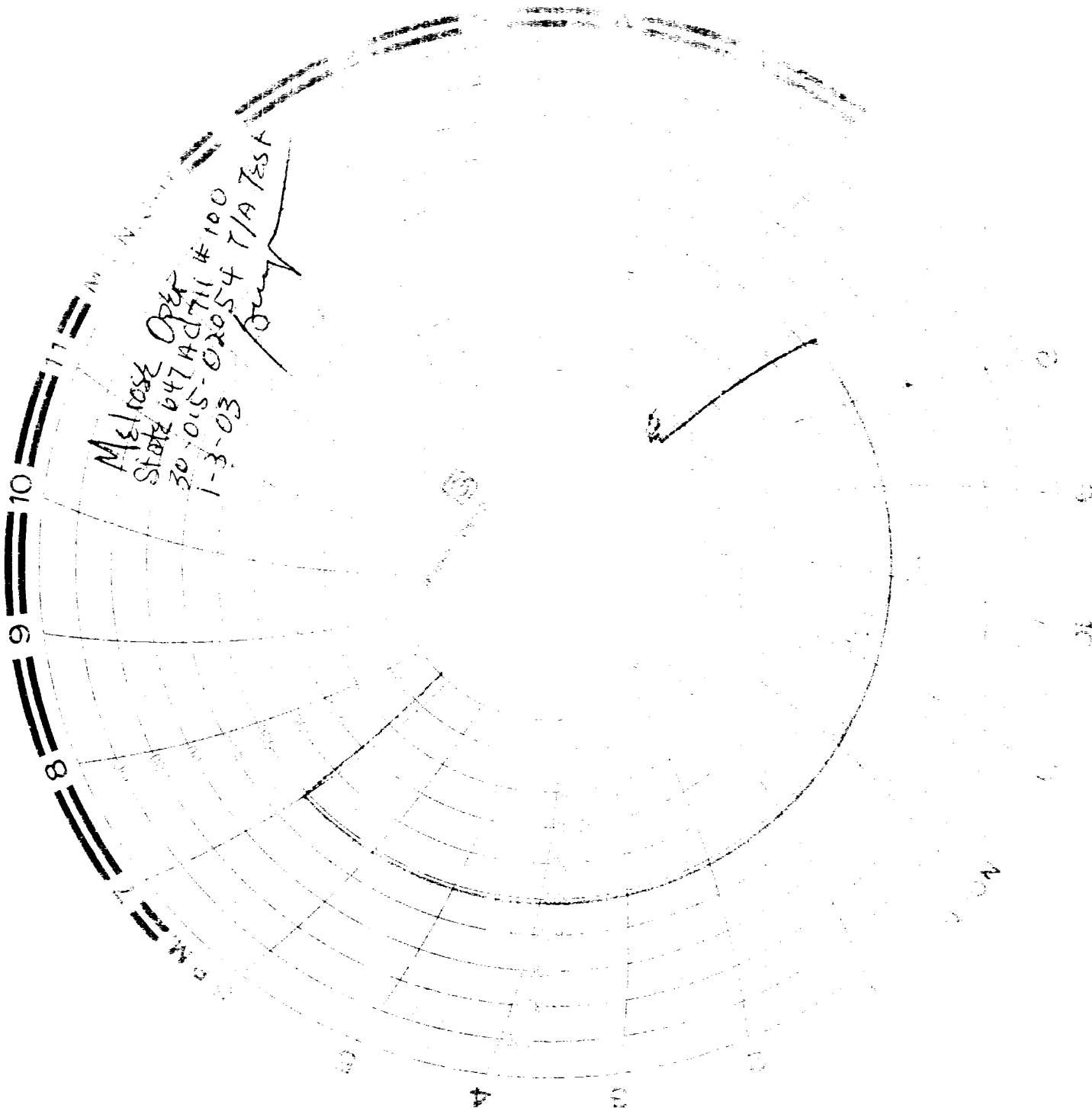
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> OTHER Injection <input checked="" type="checkbox"/>	
2. Name of Operator Melrose Operating Company	
3. Address of Operator c/o P.O. Box 953, Midland, TX 79702	
4. Well Location Unit Letter <u>A</u> <u>330</u> Feet From The <u>N</u> Line and <u>990</u> Feet From The <u>E</u> Line Section <u>27</u> Township <u>18S</u> Range <u>28E</u> NMPM <u>Eddy</u> County	
10. Elevation (Show whether DF, 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 <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER MIT test <input checked="" type="checkbox"/>	

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.  
1-3-03: Pressure tested well to 500 psi - held okay. Test witnessed by OCD, Jerry Guy. OCD took chart.

Temporary Abandoned Status approved  
JAN 1-3-08

I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE <u>Ann E. Ritchie</u>	TITLE <u>Regulatory Agent</u> DATE <u>1-8-03</u>
TYPE OR PRINT NAME <u>Ann E. Ritchie</u>	TELEPHONE NO. <u>915 684-6381</u>
(this space for State Use)	
APPROVED BY <u>[Signature]</u>	TITLE <u>Field Rep ID</u> DATE <u>JAN 21 2003</u>
CONDITIONS OF APPROVAL, IF ANY:	



Melrose Oper  
State 647 Act 711 #100  
30-015-02054 T/A Test  
1-3-03  
Bing