

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

WELL API NO.  
30-015-04548

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.  
NM27277

### 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

C.E. LaRUE & B N MUNCY JR.

3. Address of Operator

P O BOX 1370 ARTESIA, NM 88211-1370

7. Lease Name or Unit Agreement Name

GATES FEDERAL

8. Well No.

4

9. Pool name or Wildcat

LEO QUEEN GRAYBURG

4. Well Location

Unit Letter L : 2310 Feet From The S Line and 330 Feet From The W Line

Section 26 Township 18S Range 30E NMPM EDDY County

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

3421' 4R

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

#### NOTICE OF INTENTION TO:

#### SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☒

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

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.

CHANGED OUT PUMP JACK. PUT WELL BACK ON PRODUCTION 2/08/02. WELL IS MAKING  
APPROXIMATELY 2 1/2 BBLs OF OIL PER DAY AND APPROXIMATELY 0 BBLs OF WATER  
PER DAY.

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

SIGNATURE [Signature] TITLE OWNER DATE 3/15/02

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY [Signature] TITLE Wild Sp IP DATE MAR 19 2002

CONDITIONS OF APPROVAL, IF ANY: