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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., Alamogordo, NM 87410

OIL CONSERVATION DIVISION

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

WELL API NO.
30 015 20327

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
647

7. Lease Name or Unit Agreement Name
Artesia Unit

8. Well No.
67

9. Pool name or Wildcat
Artesia (Q-G-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 ☐ Gas Well ☐ OTHER Injection

2. Name of Operator
Melrose Operating Co.

3. Address of Operator
P.O. Box 5061, Midland, TX 79702

4. Well Location
Unit Letter K 2200 Feet From The South Line and 2200' Feet From The West Line
Section 3 Township 18S Range 28E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3657

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER T A Status ☒

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.

In response to Oil Conservation Division status request, this well was temporarily abandoned by Depco, Inc. in August 1984. They set a CIBP @ 2100' & dumped 35' of cement on top of CIBP. The top of cement inside the pipe is 2065'. The well was pressure tested and T/A'd. Melrose Operating Co. proposes to pressure test this well to insure the integrity of the CIBP & cement plug. This well is involved in the proposed waterflood expansion project as per hearing - NMOCD Case No. 12709.

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

SIGNATURE  TITLE Regulatory Agent DATE 5-28-02

TYPE OR PRINT NAME Ann E. Ritchie TELEPHONE NO. 915 684-6381

(this space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: