Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

WELL API NO

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

2040 Pacheco St.

| 80 | Form C-103 Revised 1-1-89 |
|----|------------------------------|
|----|------------------------------|

| DISTRICT II Santa Fe, NM 87505 | | | | | 30-015-26634 | | | | | |
|---|---------------------------------------|--------------------------|--------------|-------------|--------------------|--------------------|---|------------------|--------------|----|
| P.O. Drawer DD, Artesia, NM 882 | 10 | | • | | _ | | sindicate Type of L | ease | | |
| | | | | | | | 1 | STATE | Z! Si FEE | - |
| <u>DISTRICT III.</u> 1000 Rio Brazos Rd., Aztec, NM 87410 | | | | | ₅State Oil & Gas L | | | | | |
| | | | | | V-3436 | | | | | |
| SUND | RY NOTIC | ES AND REPO | RTS O | N WEL | LS | | As a second | | | |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | | | 7Lease Name or L | Jnit Agreement Nam | <u>те</u> 1е | | | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | | | | , | <u></u> | | ļ | | |
| Type of Well: | | | | | J.R. 29C State Com | | | | | |
| OİL GA | \s | | | | ih. Λ ≒ =¹ | | | | | |
| WELL OTHER Temporarily Abandon | | | | | | | Marall Mar | | | |
| ₂Name of Operator Nearburg Producing Company | | | | | | eWell No. | | | | |
| Address of Operator | | | | | | Pool name or Wil | deat | | | |
| 3300 N A St., Bldg 2, Suite 120, Midland, TX 79705 | | | | | | Wildcat Morrow | | | | |
| ₄Well Location | , | , | | | | | 1 | | | |
| Unit Letter C | 660 _F | eet From The | Nortl | h | Line and | 1980 | Feet From Th | ne West | Line | |
| J.III 201101 | · · · · · · · · · · · · · · · · · · · | | | | | | 550, 1010 11 | · | LAIC | , |
| Section | 29 | Township | 189 | S R | Range | 25E | NMPM | Eddy | County | |
| ioElevation (Show whether DF, RKB, RT, GR, etc.) | | | | | | | San San San | 4 | | |
| 11 C | heck App | ropriate Box t | o Indic | ate Na | ture of No | tice, Rer | port, or Other | r Data | | |
| · · · · · · · · · · · · · · · · · · · | | | | | • | SEQUENT REPORT OF: | | | | |
| PERFORM REMEDIAL WORK | | PLUG AND ABA | NOON | \boxtimes | REMEDIAL W | ORK | [] | ALTERING C | ASING | • |
| EMPORARILY ABANDON | · · · · · · · · · · · · · · · · · · · | CHANGE PLAN | 1S | | COMMENCE | DRILLING OF | PNS. | PLUG AND AN | NBANDONME | NT |
| PULL OR ALTER CASING | : | | | | CASING TEST | T AND CEME | NT JOB | | | |
| OTHER: | | | | | OTHER: | | | | | |
| ¹² Describe Proposed or Complete work) SEE RULE 1103. | d Operations (| Clearly state all pertin | ent details, | , and give | pertinent dates, | including es | timated date of start | ing any proposed | | |
| MIRU P&A rig. Set 30' surface plug. Install dry hole market | r | | | | | | | | | , |
| o., materiary note market | | | | | | | | | | |

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

SIGNATURE

TITLE Regulatory Analyst

DATE 10-02-00

TYPE OR PRINT NAME Kim Stewart

TELEPHONE NO. 915/686-8235

(This space for State Use)

APPROVED BY Mike Stubblefield

TITLE FICIAl Rep II DATE 10/18/200)

CONDITIONS OF APPROVAL, IF ANY: