Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION 2040 Pacheco St.

WELL API NO 30-015-31216

Santa Fe, NM 87505 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 sindicate Type of Lease STATE X FEE DISTRICT III 6State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Pathfinder 19 State Com Type of Well: WELL «Well No. 2Name of Operator Nearburg Producing Company 3Address of Operator Pool name or Wildcat 3300 N A St., Bldg 2, Suite 120, Midland, TX 79705 Illinois Camp Morrow, North (Gas) 4Weli Location 660 North 1295 Unit Letter Feet From The Line and East Feet From The Line Section 19 **18S** 28E Township Eddy Range NMPM County 10Elevation (Show whether DF, RKB, RT, GR, etc.) 3598' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON PERFORM REMEDIAL WORK REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON** CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ANBANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: OTHER: Surface casing and cement 12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

05/30/01: MIRU and spud on 05/29/01.

06/04/01: Drilled 17-1/2" hole to 440'. RU and ran 11 jts of 13-3/8", 48#, H40, ST&C casing to 440'. Cement casing using 185 sx 35/65 poz "C" + additives and 200 sx "C" + additives. Circ 59 sx to surface. WOC for 18 hrs. Cut off csg and weld on well head. NU BOPE and test

I hereby certify that the information above is true and complete to the best of my knowledge and belief. DATE 06-07-01 TITLE Regulatory Analyst SIGNATURE

TYPE OR PRINT NAME Kim Stewart

TELEPHONE NO. 915/686-8235

(This space for State Use)

APPROVED BY

ORIGINAL SIGNED BY TIM W. GUM STRICT II SUPERVISOR TITLE

CONDITIONS OF APPROVAL, IF ANY: