Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

c\s Form C-103
Revised March 25, 1999

WELL API NO.
30-015-24192

5. Indicate Type of Lease
STATE ☒   FEE ☐

6. State Oil & Gas Lease No.
L-4053

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.)

7. Lease Name or Unit Agreement Name:

Roy

1. Type of Well:
   Oil Well ☒   Gas Well ☐   Other

2. Name of Operator
   Harvard Petroleum Corporation

8. Well No.
   1

3. Address of Operator
   PO Box 936, Roswell, NM, 88202-0936

9. Pool name or Wildcat
   Millman – Yates, Seven Rivers, Queen

4. Well Location

Unit Letter ___H___ : __1980__ feet from the ___North___ line and _660_ feet from the __East__ line

Section 23   Township 19 South   Range 27 East   NMPM Eddy   County

10. Elevation *(Show whether DR, RKB, RT, GR, etc.)*
    3452' GR

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 ☐ MULTIPLE COMPLETION ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: **Casing Integrity Test** ☒		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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

1/11/01 – MIRU PU, PU 2 3/8" tbg and packer, RIH to ± 1350' and set packer. (Perfs 1425-1897) Test backside to 500 psi for 30" with a chart recorder. Bleed off pressure, release pkr, TOH, RD PU and clean up location.

RECEIVED
OCD - ARTESIA

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

SIGNATURE _____   TITLE ___Vice President___   DATE ___1/9/01___

Type or print name   **Jeff Harvard**   Telephone No. 505-623-1581

(This space for State use)

APPPROVED BY _____   TITLE _Field Rep II_   DATE _1/18/2001_
Conditions of approval, if any: