

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

CLSF

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. 30-015-22625
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name  STATE 19 COM
8. Well No. 2
9. Pool name or Wildcat MILLMAN SOUTH
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER
2. Name of Operator V-F PETROLEUM INC.
3. Address of Operator P.O. BOX 1889, MIDLAND TEXAS 79702

4. Well Location Unit Letter N : 660' Feet From The SOUTH Line and 2,075' Feet From The WEST Line Section 19 Township 19-S Range 28-E NMPM EDDY County
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10. Elevation (Show whether DF, RKB, RT, GR, etc.)
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11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

(SEE REVERSE)



I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE <u>J. K. Lawlis</u>	TITLE <u>Vice President</u>	DATE <u>9/6/01</u>
TYPE OR PRINT NAME <u>S.K. Lawlis</u>		TELEPHONE NO. <u>915-683-3344</u>

(This space for State Use)

APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

## MIRU PLUGGING EQUIPMENT

(MORROW PREVIOUSLY PLUGGED with CIBP @ 10,550' w/35' cement on top)

SPOT 25 sx. plug @ 9,400' & 8,500'. Pull 5 ½ casing from freepoint to be determined. Set 25 sx. stub plug & tag. Spot 25 sx. plug @ 2,400' & tag. NU wellhead, pressure test 8 5/8" casing to 500 psi for 30 minutes with chart, witnessed by OCD. RD MO plugging equipment.