

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 S. Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

WELL API NO.
30-015-30788

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
648

7. Lease Name or Unit Agreement Name:
Turkey Track 2 State

8. Well No. 1

9. Pool name or Wildcat
WC Wolfcamp (Oil)

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 ☐

2. Name of Operator
Louis Dreyfus Natural Gas Corporation

3. Address of Operator 14000 Quail Springs Parkway, Suite 600
Oklahoma City, OK 73134

4. Well Location
Unit letter K : 1650 feet from the South line and 1650 feet from the West line
Section 2 Township 19S Range 28E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3447'

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 ☐ MULTIPLE COMPLETION ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

IF: ☐ OTHER: Plug Back to Wolfcamp ☒

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.

Set CIBP @ 9,500. Pump bailed 35' of cement. Perforated the Wolfcamp from 8,874' -84'.
Acidized and tested. Well was flanged up with 5000 lb tree.

Wolfcamp perfs were non-commercial.



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

SIGNATURE Carla Christian TITLE Regulatory Technician DATE 5/30/00

Type or print name Carla Christian Telephone No. (405) 749-5263

(This space for State use)

APPROVED BY Jim W. Gentry TITLE SUPERVISOR, DISTRICT II DATE MAY 30 2000

Conditions of approval, if any: