

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

C/SF  
OP

Form C-103  
Revised 1-1-89

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**  
310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

|   |  |
|---|--|
| WELL API NO.  | 30-015-21912   |
| 5. Indicate Type of Lease                                   | STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                | K06775   |
| 7. Lease Name or Unit Agreement Name<br>Mesa Macho Com #002 |  |
| 8. Well No.   | 002  |
| 9. Pool name or Wildcat (Prorated Gas)                      | Burton Flat Morrow   |

**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:<br>OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER | 2. Name of Operator<br>Roca Production, Inc. ✓  |
| 3. Address of Operator<br>P.O. Box 10139, Midland, TX 79702  | 4. Well Location<br>Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line<br>Section <u>24</u> Township <u>20-S</u> Range <u>27-E</u> NMPM <u>Eddy</u> County |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)   |   |

|   |   |
|---|---|
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data |   |
| <b>NOTICE OF INTENTION TO:</b>  | <b>SUBSEQUENT REPORT OF:</b>                        |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                                | REMEDIAL WORK <input type="checkbox"/>              |
| TEMPORARILY ABANDON <input 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.  
We are in the process of polling our working interest partners to plug and abandon this well.



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

SIGNATURE Otis Adams TITLE Vice President DATE 10/2/00  
TYPE OR PRINT NAME Otis Adams TELEPHONE NO. 915-685-1287

(This space for State Use)

APPROVED BY Record Only TITLE DATE 10-6-00  
CONDITIONS OF APPROVAL, IF ANY: