

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Arco, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Alamo, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

|                                                                                                     |
|-----------------------------------------------------------------------------------------------------|
| WELL API NO.<br>30-015-20759                                                                        |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                                                        |
| 7. Lease Name or Unit Agreement Name<br>Esperanza                                                   |
| 8. Well No.<br>3                                                                                    |
| 9. Pool name or Wildcat<br>Esperanza (Delaware)                                                     |

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 PERMITS  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:  
OIL WELL ☐ GAS WELL ☐ OTHER ☐

2. Name of Operator  
Manzano Oil Corporation 505/623-1996

3. Address of Operator  
P.O. Box 2107/Roswell, NM 88202-2107

4. Well Location  
Unit Letter N : 660 Feet From The South Line and 1880 Feet From The West Line  
Section 4 Township 22 South Range 27 East NMPM Eddy County  
10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3122.8' GL

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"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>              | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>    | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  |                                           | CASING TEST AND CEMENT JOB <input type="checkbox"/> |                                               |
| OTHER: <input type="checkbox"/>                |                                           | OTHER: <input checked="" 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.

9/29/99 Pumped 50 sks of Neat "C" cement plug from 5200' back to 5090' (110' plug).  
9/30/99 Finish in hole w/5-1/2" csg. Total 119 jts w/guide shoe, float collar and  
20 centrizers. Set @ 4356'. Cement w/905 sks Super Modified Class C.  
Est TOC 1850'.  
10/05/99 Perf 4143, 4145, 4146, 4148 & 4149. Acidize w/500 gal of 10% NEFE + clay  
stay & 8 balls.  
10/08/99 Frac w/300 bbls of Delta Frac 20 + 25k# of 16/30 Brady Sand + 3#/gal  
Sandwedge/Flowback Control.  
10/10/99 Swab. 4th hr - FL 3100' - Rec 27 BF - tr to lite skim of oil w/rem salt  
wtr.  
10/12/99 Set CIBP @ 4130'. Cap w/25' of cement. Perf 3443, 3444, 3445, 3446, 3447 &  
3448. Acidize w/750 gal of 10% NEFE + clay stay & 10 balls.  
10/13/99 Swabbing. 10th hr - FL 3100' - Rec 7 BF - black wtr. (OVER)

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

SIGNATURE Allison Hernandez TITLE Engineering Technician DATE 10/14/99  
TYPE OR PRINT NAME Allison Hernandez TELEPHONE NO. 623-1996

(This space for State Use)

APPROVED BY Jim W. Gurn TITLE District Supervisor DATE 10-20-99  
CONDITIONS OF APPROVAL, IF ANY:

10/14/99 Set CIBP @ 3350'. Cap w/25' of cement. Perf 3056, 3507, 3058, 3059, 3060,  
3061, 3062, 3063 & 3064.