

Submit 3 Copies To Appropriate District

Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88201

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM

87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

Revised March 25, 1999

WELL API NO.

30-015-22574

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

BW-06

7. Lease Name or Unit Agreement Name:

Eugenie

8. Well No.

#1

9. Pool name or Wildcat

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 ☒ Brine Extraction Facility

2. Name of Operator

I & W, Inc.

3. Address of Operator

P.O. Box 1685

4. Well Location

Unit Letter M : 995 feet from the South line and 641 feet from the West line.

Section

17

Township

22S

Range

27E

NMPM

County: Eddy

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

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

PROPOSAL: To pull the tubing on the Eugenie #1

Due to possible hole in the tubing causing the brine to become 9.7, instead of 10.1 lbs.

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

SIGNATURE George E. Parchaman TITLE Consultant DATE 01/07/03

Type or print name George E. Parchaman

Telephone No. (505)885-6663

(This space for State use)

APPROVED BY Mrs. Stubblefield TITLE Envir. Eng. Spec. DATE 1/16/2003

Conditions of approval, if any:

x M.S.T. required.

x Notify N.M.O.C.D. to witness Actions Taken.