

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, 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.                 | 30-015-26531                                                           |
| 5. Indicate Type of Lease    | STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. | K-3077                                                                 |

|                                                                                                                                                                                                                        |                                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER P&A <input checked="" type="checkbox"/>                                                                       | 7. Lease Name or Unit Agreement Name<br>PEOC "15" State |
| 2. Name of Operator<br>Collins & Ware, Inc.                                                                                                                                                                            | 8. Well No.<br>1                                        |
| 3. Address of Operator<br>508 W. Wall, Suite 1200, Midland, Texas 79701                                                                                                                                                | 9. Pool name or Wildcat<br>Bone Springs                 |
| 4. Well Location<br>Unit Letter <u>L</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line<br>Section <u>15</u> Township <u>23S</u> Range <u>26E</u> NMPM <u>Eddy</u> County |                                                         |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>GR 3344'                                                                                                                                                         |                                                         |

|                                                                               |                                                          |
|-------------------------------------------------------------------------------|----------------------------------------------------------|
| 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 checked="" 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.

6/22/95 Set CIBP @ 6475' w/ 35' cement on top  
6/23/95 Spot 14 sx plug @ 6440'  
6/24/95 Cut casing & LD 4763' of 5 1/2" 17# N80 - 113 jts  
6/28/95 Spot 25 sx "C" plug @ 4813' - Tag @ 4741.  
Spot 10 sx plug - Tag @ 4714'  
6/29/95 Respot 10 sx plug - Tag @ 4663'  
Spot 30 sx plug @ 2882'  
Spot 30 sx plug @ 666'  
Spot 15 sx plug @ Surface  
Install plate & Dry Hole Marker per regulations.  
Well P&A

RECEIVED

JUL 10 1995

OIL CON. DIV.  
DIST. 2

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

SIGNATURE: Dianne Sumrall TITLE: Production Clerk DATE: 7/10/95

TYPE OR PRINT NAME: Dianne Sumrall TELEPHONE NO.: (915) 687-3435

(This space for State Use)

APPROVED BY: [Signature] TITLE: Field Rep DATE: 8/29/96

CONDITIONS OF APPROVAL IF ANY: