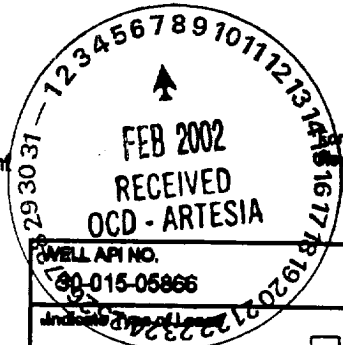


Submit 3 Copies
to Appropriate
District Office

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

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

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

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

| |
|--|
| WELL API NO. 90-015-05866 |
| Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| State Oil & Gas Lease No. LC 084758 |
| Lease Name or Unit Agreement Name R. T. Wilson Federal |
| Well No. 3 |
| Pool name or Wildcat Mason Delaware North |

| | |
|---|--|
| 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.) | |
| Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | |
| Name of Operator AGHORN OPERATING, INC. | |
| Address of Operator P. O. Box 12863 Odessa, TX 79768 | |
| Well Location Unit Letter <u>H</u> : <u>1984</u> Feet From The <u>N</u> Line and <u>660</u> Feet From The <u>E</u> Line 24 Section 28S Township 31E Range NMPM Eddy County | |
| Elevation (Show whether DF, 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 ☐
OTHER: Return to Production ☒

SUBSEQUENT REPORT OF:

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

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.

Well has been shut-in pending approval to convert to WW.

Return well to production.
1. Install electric motor and panel.
2. Turn well to battery.

After well is returned to production - send
subsequent C-103 with well test.

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

SIGNATURE Frosty Gilliam Jr. TITLE President DATE 02-07-02

TYPE OR PRINT NAME Frosty Gilliam Jr. TELEPHONE NO. 915-550-0804

(This space for State Use)

APPROVED BY [Signature] DATE FEB 3 2002

CONDITIONS OF APPROVAL, IF ANY: