

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
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

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised June 10, 2003

WELL API NO.

7004320984

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Ha Zel

8. Well Number

ONE

9. OGRID Number

216774

10. 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

2. Name of Operator

DONALD A EVANS

3. Address of Operator

PO Box 322 - REGINA, NM - 87046

4. Well Location

Unit Letter K 2083 feet from the SOUTH line and 1788 feet from the WEST line

Section

22

Township

23 N

Range

1 W

NMPM

County

SANDOVAL

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

12. 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: ☐

13. 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 recompletion.

PORTER CONCRETE PUMPING CO., PUMPED 45 BAGS OF WELL DESIGN CEMENT THRU 2 5/8" TUBING TO DEPTH OF 250 FT.. TWO INVOICES ATTACHED.

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

SIGNATURE

Donald A Evans

TITLE

OPERATOR

DATE

1-26-04

Type or print name

DONALD A EVANS

E-mail address:

NONE

Telephone No

8834863

(This space for State use)

APPROVED BY

[Signature]

TITLE

DEPUTY OIL & GAS INSPECTOR, DIST. #

DATE

JAN 30 2004

Conditions of approval, if any:

TERMS - DUE 10th OF FOLLOWING MONTH. PAST
DUE ACCOUNTS ARE CHARGED 2% INTEREST
PER MONTH ON THE UNPAID BALANCE. THIS IS
AN ANNUAL INTEREST RATE OF 24%.

PORTER CONCRETE PUMPING



Lic. # 25492
CRS # 02-055543-00-1

293-3271

No 7400

13408 Hidden Valley NE • Albuquerque, NM 87111

330-0398

Bill To: Lloyd Ingram 320-7559 Cust. Po #: _____

Address: _____

City & State: _____

Date of Pour: _____

Ordered By: Cuba N. Lopez

Project Name: To L. Lopez

Job Location: Suburb. White

Type Pump: _____ Truck No.: _____

Operator: _____ Laborer: William R. G.

Terms and Conditions governing this rental as set forth on reverse side agreed to by:
(To be signed at start of job)

Customer Name _____ By _____

Dispatch Time: _____

Arrive Time: _____

Start Time: 10

Finish Pump: _____

Leave Job: 11:00

Return Shop: _____

Chargeable Hrs: 4 Rate: 2

Yards Pumped: 1 Mix: _____ Rate: 1

Bags of Slurry @: _____

Travel Charge: 100 Rate: 200

Concrete Supplier: 289-3820

SUB TOTAL

SALES TAX

TOTAL

The above times, quantity pumped and elevation are verified to be correct.

Cust. Name: _____ (to be signed upon completion of job)

By: [Signature] Date: _____

ESPANOLA TRANSIT MIX
Cuba, New Mexico Phone: (505) 289-3820

Bill To: DON EVANS Account No.: _____ Job No.: _____

Job Name: _____ Shipped/ Delivered To: Regina

ITEM		STOCK CODE	NUMBER ZONE	UNIT PRICE	AMOUNT	
45 bags Cement well Design					475	00
4 Hrs Standby Time				@ 45 ⁰⁰	180	00
paid by check # 1243						
FRACTIONAL LOAD CHARGE						
GROSS:				Sub Total	655	00
TARE:				Tax	37	66
NET:				TOTAL	692	66

Date: JAN-20-4001 Time _____ Truck No. 10440 Rate CASH
ESPANOLA TRANSIT MIX CO. AND DRIVER OF TRUCK ARE RELEASED FROM ANY RESPONSIBILITY FOR DAMAGE WHICH MAY BE INCURRED IN DELIVERING MATERIALS.

RECD. BY: Don Evans INVOICE COPY _____ TICKET NO. CUB506377