

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

**OIL CONSERVATION DIVISION**

**DISTRICT I**

P.O. Box 1980, Hobbs NM 88241-1980

**DISTRICT II**

P.O. Drawer DD, Artesia, NM 88210

**DISTRICT III**

1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.

Santa Fe, NM 87505

WELL API NO. 30-045-25560
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator Cross Timbers Operating Company	
3. Address of Operator 2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401	
4. Well Location Unit Letter <u>A</u> : <u>1,190</u> Feet From The <u>North</u> Line and <u>830</u> Feet From The <u>East</u> Line Section <u>27</u> Township <u>30N</u> Range <u>12W</u> NMPM San Juan County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>5,470' GR</u> <u>5,483' KB</u>	

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: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: Surface Commingle Gas Production ☒

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.

Surface comingled Stedje Gas Com #1E gas production with Stedje Gas Com #2 gas production effective 10/2/99 per Commingling Order PC-1002.

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

SIGNATURE Ray Martin TITLE Operations Engineer DATE 10/27/99

TYPE OR PRINT NAME Ray Martin TELEPHONE NO. (505)324-1090

(This space for State Use)

ORIGINAL SIGNED BY ERNIE BUSCH

APPROVED BY \_\_\_\_\_ TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 3 DATE NOV 4 1999

CONDITIONS OF APPROVAL, IF ANY: