

Submit 3 Copies To Appropriate District
Office
District I
1625 N French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO.
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input 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 BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH
PROPOSALS.)

1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other
2. Name of Operator J.C. WELL SERVICE INC.
3. Address of Operator P.O. BOX 51 FARMINGTON, NM 87499

7. Lease Name or Unit Agreement Name: UTE MOUNTAIN "B"
8. Well No. #S #4-#10-#20-#21
9. Pool name or Wildcat VERDE GALLUP

4. Well Location Unit Letter _____ : _____ feet from the _____ line and _____ feet from the _____ line Section _____ Township _____ Range _____ NMPM _____ County _____

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 <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: PUT INTO PRODUCTION <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

THIS GROUP OF WELL'S ON UTE "B" LEASE WILL BE PLUGGED OR PUT INTO PRODUCTION
IN THE NEXT 6 MONTHS



I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE _____	TITLE OPERATOR	DATE 8/13/01
Type or print name JOHN CUNNINGHAM	Telephone No. 327-9931	
(This space for State use)		

APPROVED BY _____	TITLE DEPUTY OIL & GAS INSPECTOR, DIST. IV	DATE AUG 13 2001
Conditions of approval, if any:		

K

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STATE ☐ FEE ☐

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7. Lease Name or Unit Agreement Name:

UTE MOUNTAIN "B"

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VERDE GALLUP

SUNDRY NOTICES AND REPORTS ON WELLS

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1. Type of Well:

Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator

J.C. WELL SERVICE INC.

3. Address of Operator

P.O. BOX 51 FARMINGTON, NM 87499

4. Well Location

Unit Letter B : _____ feet from the _____ line and _____ feet from the _____ line

Section 29 Township 31N Range 15W NMPM County _____

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: PUT INTO PRODUCTION ☒

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.

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#1	45-10380	6-97	#10	45-10240	9-97
#2	45-10346	6-97	#11	45-10745	9-97
#4	45-10143	2-94	#16	45-24621	Producing
#7	45-10056	Producing	#20	45-25240	TA
#8	45-10155	12-99	#21	45-25239	TA

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

SIGNATURE John Cunningham TITLE OPERATOR DATE 8/13/01

Type or print name JOHN CUNNINGHAM Telephone No. 327-9931

(This space for State use)

APPROVED BY Charlie TR TITLE DEPUTY OIL & GAS INSPECTOR DATE AUG 13 2001

Conditions of approval, if any: