

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 88241-1980

**DISTRICT II**

P.O. Drawer DD, Artesia, NM 88210

**DISTRICT III**

1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.  
30-045-25108

5. Indicate Type of Lease  
STATE ☐ FEE ☒

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 OR  
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  
Taurus Exploration U.S.A., Inc.

3. Address of Operator  
2198 Bloomfield Highway, Farmington, NM 87401

4. Well Location  
Unit Letter F : 1800 Feet From The North Line and 1770 Feet From The West Line

Section 7 Township 31N Range 12W NMPM San Juan County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
5834 GR

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: Downhole Commingle ☒

**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.

In accordance to DHC-2139, it is intended to downhole commingle this well as follows:

1. MIRU. TOH and lay down MV tubing string. Release seal assembly and TOH.
2. TIH with packer milling assembly. Mill out baker model F at 4815'. TOH.
3. TIH and clean out to 6950'. Land tubing at 6900'. Install single wellhead.

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

SIGNATURE Monica Taylor TITLE Production Assistant DATE 12/15/98

TYPE OR PRINT NAME Monica Taylor TELEPHONE NO. 505-325-6800

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 43 DATE DEC 21 1998

CONDITIONS OF APPROVAL, IF ANY: