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

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. 30-005-20814

5. Indicate Type of Lease BLM 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 TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name: Wattam Fed. SWD

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER SWD

2. Name of Operator: John R. Stearns dba Stearns

8. Well No. #6

3. Address of Operator: HC 65 Box 988, Crossroads, N.M. 88114

9. Pool name or Wildcat: Tomahawk

4. Well Location
Unit Letter A : 643' Feet From The North Line and 782 Feet From The East Line

Section 7 Township 8S Range 31E NMPM Chaves County

10. 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: | | SUBSEQUENT REPORT OF: | |
|---|---|---|---|
| PERFORM REMEDIAL WORK ☐ | PLUG AND ABANDON ☐ | REMEDIAL WORK ☐ | ALTERING CASING ☐ |
| TEMPORARILY ABANDON ☐ | CHANGE PLANS ☐ | COMMENCE DRILLING OPNS. ☐ | PLUG AND ABANDONMENT ☐ |
| PULL OR ALTER CASING ☐ | | CASING TEST AND CEMENT JOB ☐ | |
| OTHER: ☐ | | OTHER: SWD ☐ | |

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.

Run in hole with AD-1 packer and 2 7/8" plastic lined tubing and set packer @ 3395'. Circulated packer fluid, set packer and tested to 400# for 35 min. Held good and put in use.

OCT 2005 Received Hobbs OCD

SWD-986

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

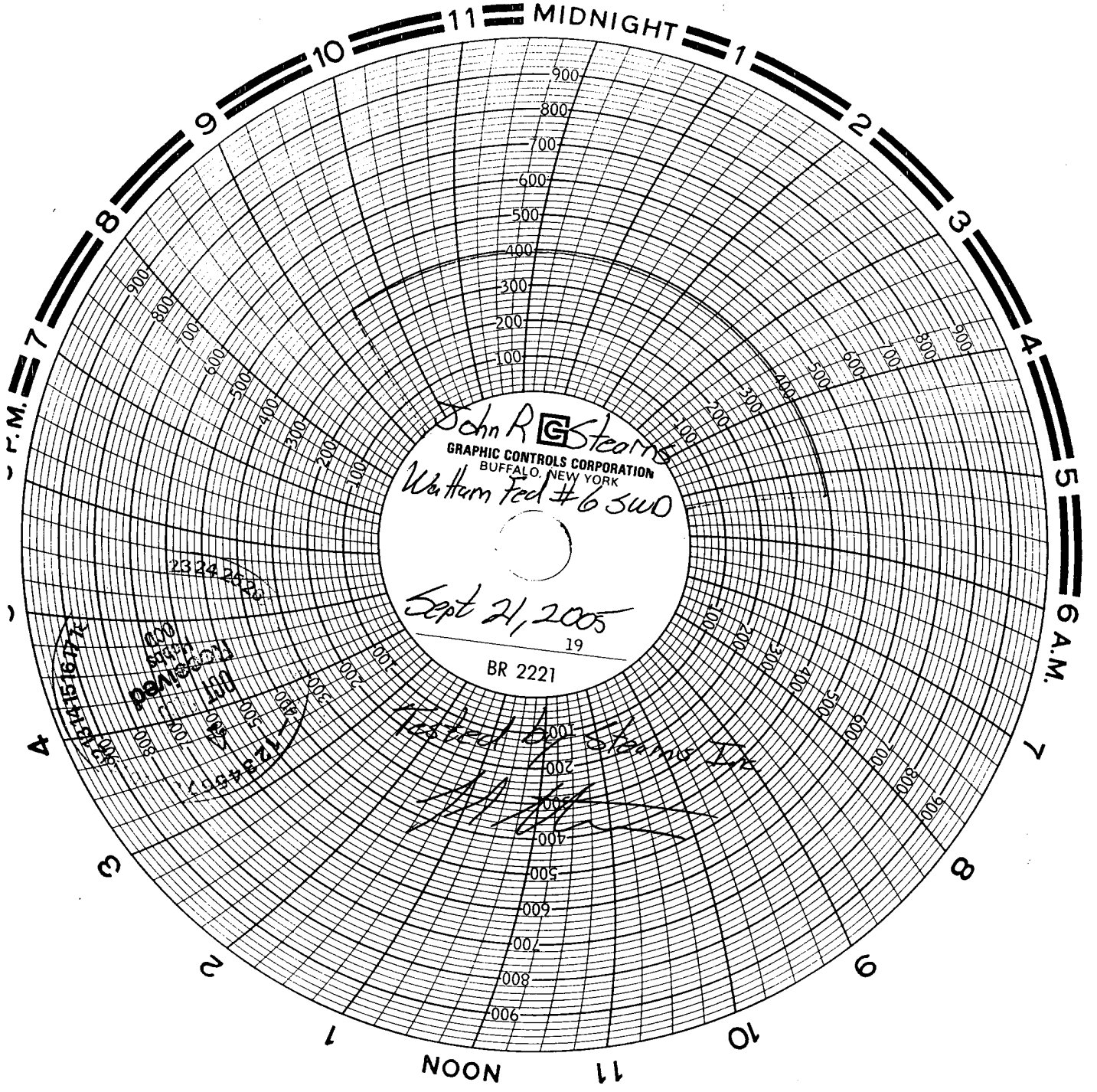
SIGNATURE John R. Stearns TITLE Owner DATE 9/30/05

TYPE OR PRINT NAME John R. Stearns TELEPHONE NO. 505-675-2356

(This space for State Use)

APPROVED BY Gary W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE OCT 05 2005

CONDITIONS OF APPROVAL, IF ANY:


MIDNIGHT
NOON
6 A.M.
P.M.
John R Steams
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
Watham Fed #6 SWD
Sept 21, 2005
19
BR 2221
Tested Steams A-4