

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
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
May 27, 2004

WELL API NO. 30-025-27952
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 15561
7. Lease Name or Unit Agreement Name: NM A State
8. Well Number 2
9. OGRID Number 24173
10. Pool name or Wildcat Mescalero San Andres

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	7. Lease Name or Unit Agreement Name: NM A State
2. Name of Operator Vintage Petroleum Inc.	8. Well Number 2
3. Address of Operator P.O. Box 50250 Midland, TX 79710-0250	9. OGRID Number 24173
4. Well Location Unit Letter <u>E</u> : <u>2310</u> feet from the <u>north</u> line and <u>660</u> feet from the <u>west</u> line Section <u>11</u> Township <u>10S</u> Range <u>32E</u> NMPM County <u>Lea</u>	10. Pool name or Wildcat Mescalero San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4286'	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

11/05/07

Contacted NMOCD, Maxi Brown. Set steel pit. MIRU Triple N rig #22 and plugging equipment. ND wellhead, NU BOP. RIH w/ 127 jts 2 3/8" workstring and tagged existing CIBP @ 3,971'. RU cementer and circulated hole w/ mud. Pumped 25 sx C cmt 3,971 - 3,725'. PUH w/ tubing to 2,264' and pumped 25 sx C cmt 2,264 - 2,018'. PUH w/ tubing to 1,824' and pumped 25 sx C cmt 1,824 - 1,578'. PUH w/ tubing to 377' and circulated w/ 40 sx C cmt 377' to surface. POOH w/ tubing. ND BOP. RDMO.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE David Stewart TITLE Sr. Regulatory Analyst DATE 11/6/07

Type or print name David Stewart

E-mail address:

Telephone No. 432-685-5717

For State Use Only

APPROVED BY Chris Williams TITLE OCD DISTRICT SUPERVISOR/GENERAL MANAGER DATE JAN 17 2008

Conditions of Approval, if any:

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.