

Submit 1 Copy To Appropriate District  
 Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 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

Form C-103  
 October 13, 2009

**RECEIVED**  
 MAR 02 2010  
**HOBBSOCD**

**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-025-23621
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Hobbs State
8. Well Number 3
9. OGRID Number 161968
10. Pool name or Wildcat SWD San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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  Gas Well  Other SWD

2. Name of Operator  
Mesquite SWD Inc. Liquid Resource Services LLC

3. Address of Operator  
1210 Mesquite SWD INC  
 P.O. Box 1479 Carlsbad NM 88221-1479

4. Well Location  
 Unit Letter B : 990 feet from the North line and 1830 feet from the East line  
 Section 29 Township 18S Range 38E NMPM County Lea

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <u>MIT</u> <input checked="" type="checkbox"/>		OTHER: <u>Mit</u> <input checked="" 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Per OCD Santa fe request Mesquite ran a MIT pressured up to 535# for 30 min held. Witness by Silvia Dickey OCD Hobbs.

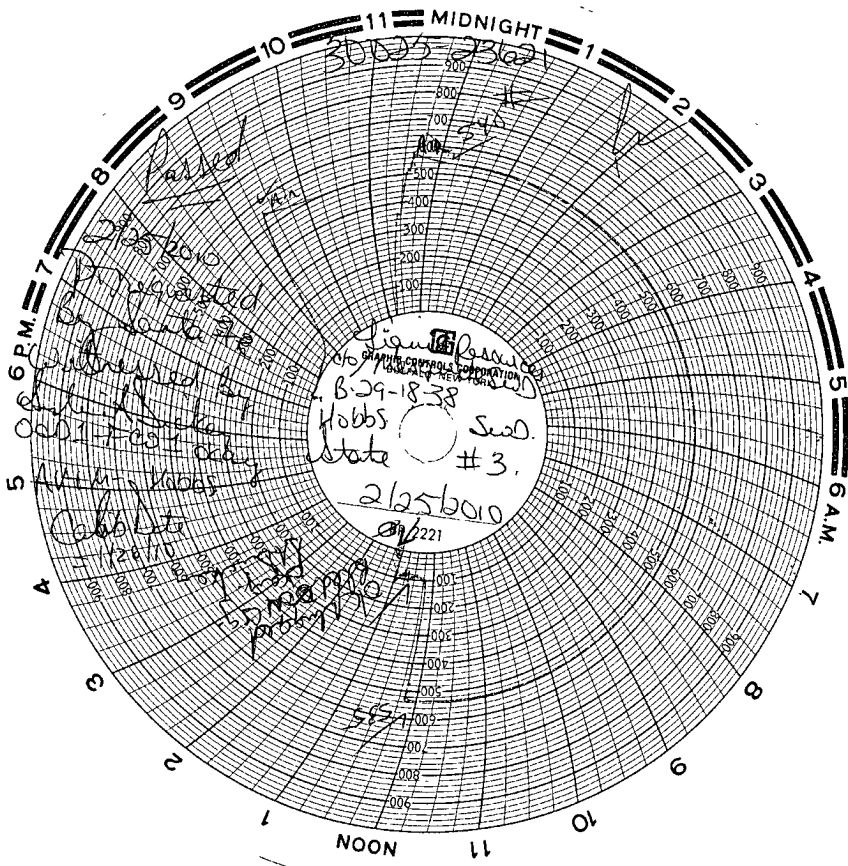
Spud Date:  Rig Release Date:

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

SIGNATURE Clay Wilson TITLE President DATE 2-25-2010

Type or print name Clay L Wilson E-mail address: claylwilson@pccnm.com PHONE: 575-706-1840  
**For State Use Only**

APPROVED BY: [Signature] TITLE Staff DATE 3-4-10  
 Conditions of Approval (if any):



RECEIVED

MAR 02 2000

HOBBS CO

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George  
Parshman  
Cly Stat

