

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  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.  
30-025-31454

5. Indicate Type of Lease  
STATE  FEE

6. State Oil & Gas Lease No.  
B 4120

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  
West Lovington Unit

1. Type of Well:  
OIL WELL  GAS WELL  OTHER

2. Name of Operator  
GREENHILL PETROLEUM CORPORATION

8. Well No.  
89

3. Address of Operator  
11490 Westheimer, Suite 200, Houston, Texas 77077

9. Pool name or Wildcat  
West Lovington Upper San Andres

4. Well Location  
Unit Letter G : 1335 Feet From The East Line and 1335 Feet From The North Line  
Section 7 Township 17S Range 36E NMPM Lea 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: Correction on C-101

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.

The surface casing will be set at 1300 feet instead of 350 feet as reported  
on the C-101 — Cemented w/550 sv + cure to surface

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

SIGNATURE Michael J. Newport TITLE Land Mgr.-Permian Basin DATE 12-9-91

TYPE OR PRINT NAME Michael J. Newport TELEPHONE NO. 713 589-8484

(This space for State Use) ORIGINAL SIGNATURE OF APPLICANT  
ELECTRICITY DIVISION

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JAN 2 2 '92

CONDITIONS OF APPROVAL, IF ANY: