| N . OF COPIES RECEIVED  |                                  |                    |                      |                      | Form C-103                        |                       |
|---|----------------------------------|--------------------|----------------------|----------------------|-----------------------------------|-----------------------|
| DISTRIBUTION  |                                  |                    |                      |                      | Supersedes Old<br>C-102 and C-103 |                       |
| SANTA FE  | NEW MEX                          | ICO OIL CONS       | SERVATION COM        | AISSION              | Effective 1-1-                    | 65                    |
| FILE  |                                  |                    |                      |                      | 5a. Indicate Type                 | e of Lease            |
| and office  |                                  |                    |                      |                      | State X                           | Fee                   |
| OPERATOR  | <del></del>                      |                    |                      |                      | 5. State Oil & Ga                 | ıs Lease No.          |
|   |                                  |                    |                      |                      | LG-3691                           |                       |
| SUNDRY NOTICES AND REPORTS ON WELLS 160 NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. 150 NOT USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) |                                  |                    |                      |                      |                                   |                       |
| OIL AS WELL   | OTHER-                           |                    |                      |                      | 7. Unit Agreemen                  |                       |
| 7.33 inferit Sperator<br>V. H. Westbrook  |                                  |                    |                      |                      | 8. Farm or Lease Name State BI    |                       |
| A streus of Operator  |                                  |                    |                      |                      | 9. Well No.                       |                       |
| P.O. Box 2264,  | Hobbs, NM 88240                  |                    |                      |                      | 1                                 |                       |
| 4. Location of Well   |                                  |                    |                      |                      | 10. Field and Po                  | of, or Wildegt        |
| UNIT LETTER   | . 1980 FEET FROM TI              | North              | LINE AND             | 2180 FEET FROM       | Mille                             | HH                    |
| THE West LINE   | , SECTION 7 OW                   | NSHIP              | 95 RANGE             | 36E                  |                                   |                       |
|   | 15. Elevation 3792               |                    | DF, RT, GR, etc.)    |                      | 12. County<br>Lea                 |                       |
| Cl  | neck Appropriate Box T           | o Indicate N       | lature of Notice     | e, Report or Oth     | ier Data                          |                       |
| NOTICE  | OF INTENTION TO:                 |                    |                      | SUBSEQUENT           | REPORT OF:                        |                       |
| TOTAL REMEDIAL WORK XX  |                                  | D ABANDON          |                      |                      |                                   |                       |
| TI MPORARILY ABANDON  | PLOG AN                          | D ABANDON []       | REMEDIAL WORK        | 5 0015               |                                   | ING CASING            |
| W OR ALTER CASING   | CHANGE                           | PLANS              | CASING TEST AND C    | <del></del>          | PE06 X                            | NO ABANDONMENT        |
|   |                                  |                    |                      |                      |                                   |                       |
| OTHER   |                                  |                    |                      |                      |                                   |                       |
| . ". Lesarthe Proposed or Compl   | eted Operations (Clearly state a | ill pertinent deta | ils, and give pertin | ent dates, including | estinated date of s               | starting any proposed |
| u ork) SEE RULE 1103.   |                                  |                    |                      |                      |                                   |                       |
|   |                                  |                    |                      |                      |                                   |                       |
|   |                                  |                    |                      |                      |                                   |                       |
|   |                                  |                    |                      |                      |                                   |                       |
| We propose to re  | e-acidize w/3500 ga              | llons of 5         | 5% acid and          | a clay dehydi        | rator at                          |                       |
| perforations 492  | 20'-4930'.                       |                    |                      |                      |                                   |                       |
|   | back to evalute res              | ults.              |                      |                      |                                   |                       |
|   |                                  |                    |                      |                      |                                   |                       |
|   |                                  |                    |                      |                      |                                   |                       |
|   |                                  |                    |                      |                      |                                   |                       |
|   |                                  |                    |                      |                      |                                   |                       |
|   |                                  |                    |                      |                      |                                   |                       |
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|   |                                  |                    |                      |                      |                                   |                       |
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|   |                                  |                    |                      |                      |                                   |                       |
|   |                                  |                    |                      |                      |                                   |                       |
|   |                                  |                    |                      |                      |                                   |                       |
| ! hereby certify that the infor   | mation above is true and compl   | te to the best o   | f my knowledge and   | belief.              |                                   |                       |
| , , , , , , , , , , , , , , , , , , ,   |                                  |                    | , ,                  |                      |                                   |                       |
| Mike U  | Verlbrook                        | TITLE Pr           | oduction Sur         | pervisor             | DATE March                        | 1 28, 1983            |
| ORIGINAL SIG  | SNED BY EDDIE SEAY               |                    |                      |                      |                                   |                       |
| _   | AS INSPECTOR                     |                    |                      |                      | DATE MAR                          | 3 1 1002              |
| PREVED BY   | AT TO TO TOTAL                   | TITLE              |                      |                      | DATE ATTI                         | O T 1900              |