

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

**OIL CONSERVATION DIVISION**  
2040 Pacheco St.  
Santa Fe, NM 87505

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025-28509

5. Indicate Type of Lease  
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

State A A/C 3

1. Type of Well:  
OIL WELL  GAS WELL  OTHER  Water Injection Well

2. Name of Operator  
Raptor Resources, Inc.

8. Well No. 10

3. Address of Operator  
901 Rio Grande, Austin, Texas 78701

9. Pool name or Wildcat  
Langlie Mattix SR-Q-GB

4. Well Location  
Unit Letter G : 1345 Feet From The North Line and 1480 Feet From The East Line  
Section 10 Township 23S Range 36E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
GR-3650'

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   
TEMPORARILY ABANDON  CHANGE PLANS   
PULL OR ALTER CASING   
OTHER:

REMEDIAL WORK  ALTERING CASING   
COMMENCE DRILLING OPNS.  PLUG AND ABANDONMENT   
CASING TEST AND CEMENT JOB   
OTHER: T/A Status Test

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.

Test Date: 3-14-03

1. Load casing with 2% KCl water and corrosion inhibitor. (Packer @ 3559')

2. Pressure test casing from surface to 3559' to 500 psi for 30 minutes.  
(Record test on chart for OCD subsequent report.)

3. Request TA status for 5 years.

Request of Temporary  
Abandonment Expires 3/19/08

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

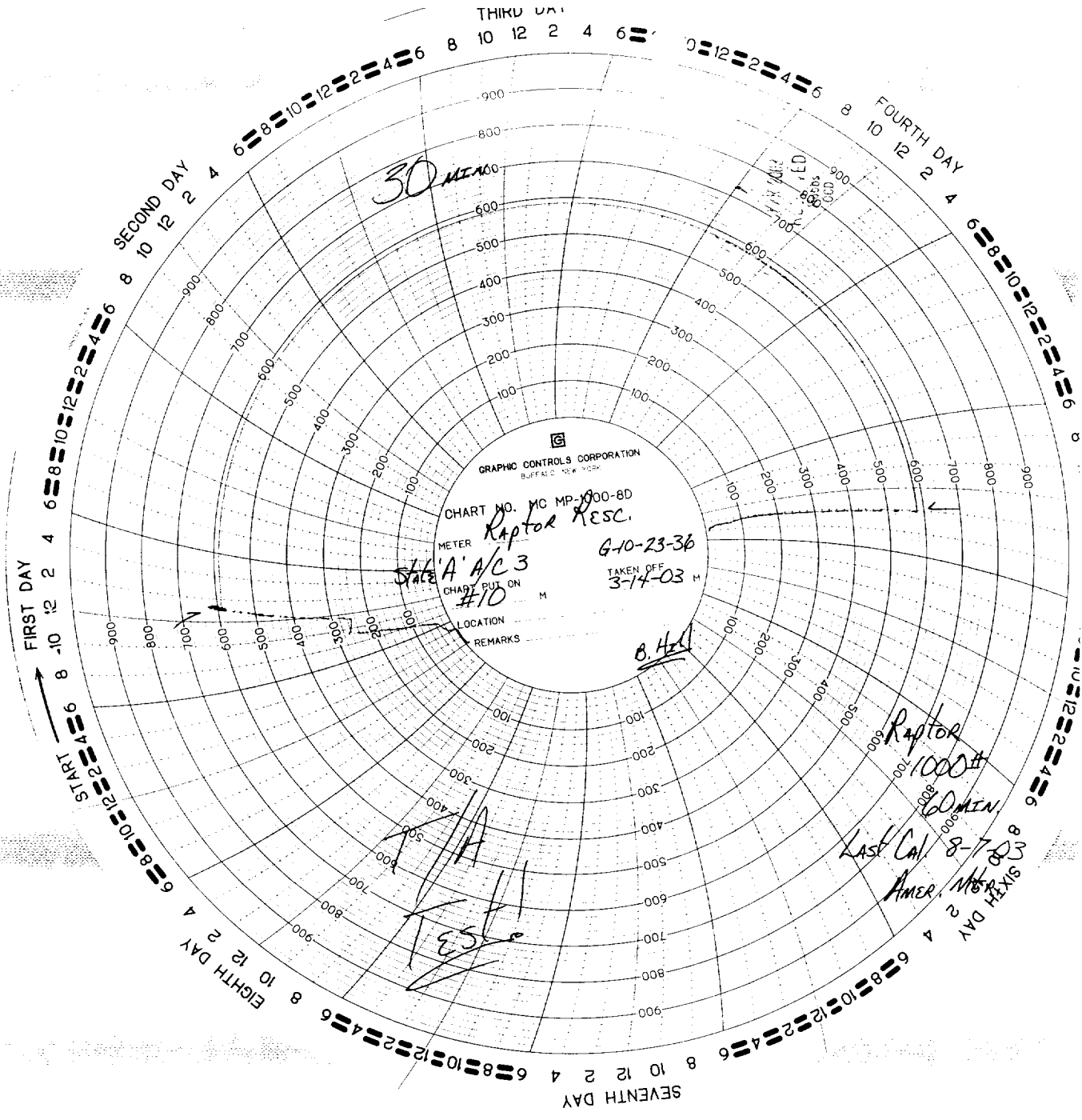
SIGNATURE Joel Sisk TITLE Production Foreman DATE 3-17-03  
TYPE OR PRINT NAME Joel Sisk (505) TELEPHONE NO. 394-2574

(This space for State Use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL SIGNED BY  
GARY WITTEBINK  
OCD FIELD REPRESENTATIVE II/STAFF MANAGER

MAR 19 2003  
MAR 19 2003



THIRD DAY

SECOND DAY

FOURTH DAY

FIRST DAY

GRAPHIC CONTROLS CORPORATION  
BUFFALO, N.Y. 14204

CHART NO. MC MP-1000-8D  
METER Raptor RESC.  
CHART PUT ON #10  
TAKEN OFF 3-14-03 M

LOCATION  
REMARKS

30 MIN

Raptor  
1000#  
60 MIN

LAST CAL 8-7-03  
AMER. METER

A. H. H.

B. H. H.

START

SEVENTH DAY

EIGHTH DAY

SIXTH DAY