

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 87240  
 District II  
 811 South First, Artesia, NM 87210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised March 25, 1999

OIL CONSERVATION DIVISION  
 2040 South Pacheco  
 Santa Fe, NM 87505

WELL API NO. 30-025-11690
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NMLC032579A
7. Lease Name or Unit Agreement Name:  Harrison
8. Well No. 22-2
9. Pool name or Wildcat Langlie Mattix

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 injector (pending)

2. Name of Operator  
 Permian Resources, Inc.

3. Address of Operator  
 P. O. Box 590, Midland, TX 79702

4. Well Location  
 Unit Letter I : 2310 feet from the South line and 990 feet from the East line  
 Section 22 Township 25S Range 37E NMPM Lea County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3066' GR

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

NOTICE OF INTENTION TO:  
 PERFORM REMEDIAL WORK  PLUG AND ABANDON   
 TEMPORARILY ABANDON  CHANGE PLANS   
 PULL OR ALTER CASING  MULTIPLE COMPLETION

SUBSEQUENT REPORT OF:  
 REMEDIAL WORK  ALTERING CASING   
 COMMENCE DRILLING OPNS.  PLUG AND ABANDONMENT   
 CASING TEST AND CEMENT JOB

OTHER:  OTHER: Prep for SWD conversion

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

CIT on 02-05-01

Start psi @ 460# End psi @ 430#  
 SWD conversion pending availability of equipment and personnel

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

SIGNATURE Dave Kvasnicka TITLE Geologist DATE 02-16-01

Type or print name Dave Kvasnicka Telephone No. 915/685-0113  
 (This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of approval, if any:

SWD-793

MS

