Submit 3 Copies To Appropriate District Office State of New Mexico	Form C-103 Revised May 08, 2003
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION	30-053-20018 5. Indicate Type of Lease
District III 1220 South St. Francis Dr.	STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM	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	7. Lease Name or Unit Agreement Name NAT
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	8. Well Number #2
2. Name of Operator Twining Drilling Corporation	9. OGRID Number
3. Address of Operator 332 White Oak Dr. NE, Albuquerque, NM 87122	164187 10. Pool name or Wildcat
4. Well Location	2 Wildcat
Unit Letter G: 1980 feet from the NORTH line and 1980 feet from the EAST line	
Section 27 Township 4N Range 1E	NMPM County Socorro
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5170'GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: S PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL V	SUBSEQUENT REPORT OF: WORK ALTERING CASING
TEMPORARILY ABANDON	DRILLING OPNS PLUG AND ABANDONMENT
PULL OR ALTER CASING MULTIPLE CASING TES CEMENT JO	ST AND
OTHER: OTHER:	
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
Upon completion of testing and evaluation, if noncommercial, shoot pipe and attempt to retrieve 7000' of 5 1/2" casing, then plug the well as follows: spot 35 sks premium cement across perforations 11300' thru 11260'; spot 35 sks at 9280' I/O; spot 35 sks where 5 1/2" casing is shot; spot 45 sks at 6392' I/O; spot 35 sks at 2000' I/O and spot 10 sks at surface; install dry hole marker.	
I hereby certify that the ipformation above is true and complete to the best of my know	ledge and belief.
SIGNATURE MELAS FORMAND TITLE President	DATE 12/21/04
Type or print name Nathan A. Twining E-mail address: oagman@aol.com	Telephone No. (505) 856-2238
APPPROVED BY APPPROVED BY TITLE	+ Il Supervisorate 12/21/04
Conditions of approval, if any:	