Submit 3 Copies To Appropriate District Office District !	State of New Mexico Energy, Minerals and Natural Resources	MAR 19 2009 Form C-103 May 27, 2004		
1625 N. French Dr , Hobbs, NM 88240		WELL API NO. 30 -015 -0287 02897		
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease		
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE K FEE		
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.		
87505	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPO	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	1 4		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		Cave Pool ut		
1. Type of Well: Oil Well	Gas Well Other	8. Well Number 27		
2. Name of Operator NM OCO For Mo	uks + Carner	9. OGRID Number		
3. Address of Operator		10. Pool name or Wildcat		
4. Well Location				
Unit Letter P	= 990 feet from the $=$ line and	990 feet from the E line		
Section 5	Township 17 Range 29	NMPM County		
	11. Elevation (Show whether DR, RKB, RT, GR,	etc.)		
Pit or Below-grade Tank Application	or Closure [
Pit type Depth to Grounds	waterDistance from nearest fresh water well	Distance from nearest surface water		
Pit Liner Thickness: mi		Construction Material		
12. Check	Appropriate Box to Indicate Nature of Noti	ce, Report or Other Data		
NOTICE OF II		UBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	· · / /			
TEMPORARILY ABANDON PULL OR ALTER CASING	_ 1	DRILLING OPNS.□ P AND A □ MENT JOB □		
OTHER: 13. Describe proposed or com	OTHER:	s, and give pertinent dates, including estimated date		
of starting any proposed v	vork). SEE RULE 1103. For Multiple Completions	: Attach wellbore diagram of proposed completion		
or recompletion.	IBPD 2296 W/258	+ D - Circle Plage		
1) cot 51/2" C	LIBP(2) 2296' W1258	Muj		
1) 301 312	(2021 (TAG)	1 del Carrio		
2) 5, Pot 255,	1 5 5 6	ce Infoutat casing		
2) Auto + 30 s	(BPD) 2296 W/255 x D) 2021 (TAG) x from 311 to Surface Ony hole Marker- Clear			
	1 M. Nor- Clear	1 up la.		
4) Install L)ny hole Market			
<i>1</i>)	•			
		Notify OCD 24 hrs. prior		
		To any work done.		
Steel	Pits Will De 11/50	20		
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .				
SIGNATURE MAN 1)	TITLE agant (or NMOCD DATE 3/17/09		
Type or print name	E-mail address:	Telephone No.		
For State Use Only	11.0	,		
APPROVED BY: Conditions of Approval (if any):	TitleTITLE	DATE 3/20/09		

Submit 3 Copies To Appropriate District	State of New Mexico	MAY 19 2009	Form C-103		
Office <u>District I</u>	Energy, Minerals and Natural Resources		May 27, 2004		
1625 N. French Dr., Hobbs, NM 88240	en e	WELL API NO.			
<u>District II</u> 1301 W. Grand Ave , Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-02897 5. Indicate Type of Le	oose EEDEDAI		
District III	1220 South St. Francis Dr.	STATE	FEE [
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	6. State Oil & Gas Le			
1220 S. St. Francis Dr., Santa Fe, NM		E-10163			
87505	ACEG AND DEPORTS ON WELLS	7 I sees Nome on Lin	it A manmant Nama		
	ICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Un CAVE POOL UNIT	it Agreement Name		
	CATION FOR PERMIT" (FORM C-101) FOR SUCH	8. Well Number			
PROPOSALS)	a w 1 🗖 od	027			
1. Type of Well: Oil Well 2. Name of Operator	Gas Well Other	9. OGRID Number			
	MARKS AND GARNER PRODUCTION LTD CO.	14070			
3. Address of Operator	MARKS AND GARNER PRODUCTION LTD CO.	10. Pool name or Wil	deat		
P.O. BOX 70 LOVINGTON,	NM 88260	CAVE GB/SA			
4. Well Location					
1	feet from the SOUTH line and 990 feet from the	ne EAST line			
Section 5 Township 17S					
Section 3 Township 173	11. Elevation (Show whether DR, RKB, RT, GR, etc.				
	11. Biovation (Bhow whomb) Big 1025) 112, 314 315				
Pit or Below-grade Tank Application [or Closure				
Pit typeDepth to Grounds	vaterDistance from nearest fresh water wellDi	stance from nearest surface w	/ater		
Pit Liner Thickness: mil	Below-Grade Tank: Volumebbls; C	Construction Material			
12 Check	Appropriate Box to Indicate Nature of Notice	Report or Other Dat	ta		
12. Check	appropriate box to indicate tracare of fronce	, resport of Other Da	•••		
NOTICE OF IN		SSEQUENT REPO			
PERFORM REMEDIAL WORK 🗌			TERING CASING		
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	IT JOB			
OTHER:	☐ OTHER:		П		
13. Describe proposed or com	oleted operations. (Clearly state all pertinent details, an	nd give pertinent dates, ir	ncluding estimated date		
- C - 4 - 1 - 1	and OPP DITT 1102 Part Multiple Compilations. A	م مسمسم ما المسمسم م	funamagad assemblation		
or recompletion.		. 11.	/ · · · · ·		
or recompletion. 4/27/09 - Set CIBAD 2270' - Cinc. Plagging Mad 4/27/09 - Set CIBAD 2270' - Cinc. Plagging Mad 4/27/09 - Set CIBAD 2270' - Cinc. Plagging Mad 4/28/09 - Spot 405x on CIBA- Perf D 311' - Circ. 1005x to Surface 4/28/09 - Spot 405x on CIBA- Perf D 311' - Circ. 1005x to Surface					
4/27/04 - Set CIDIC 20 10 DAF @ 211' Circ. 100 SX TO SUM					
4/28/09 - 3Pot 405X on CIOP- TO 100					
Install PA Marker - Clean up location					
11572	- II FOT TIME				
I hereby certify that the information	above is true and complete to the best of my knowled	ge and belief. I further cer	rtify that any pit or below-		
grade tank has been/will be constructed or	r closed according to NMOCD guidelines [], a general permit [] or an (attached) alternative	OCD-approved plan ∐.		
SIGNATURE MAKE	TITLE AGENT	DATE 5-15-0)9		
120					
Type or print name	E-mail address:	Teleph	ione No.		
For State Use Only	/ /				
ADDROVED BY:	TITLE Approved for pluggin	g of well horo out.	ATE 5/21/09		
APPROVED BY: Conditions of Approval (if any):	This ting of him	Control of the Contro	115 3/2/07		
Conditions of Approval (II any):		Report of Well Plugging) t OCD Web Page under			
	Forms, www.cmnrd.st.	ite.nm.us/oed.			
					

Submit 3 Copies To Appropriate District Office	State of New Mexico	MAY 19 2009	Form C-1032 May 27, 2004
District I 1625 N French Dr , Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO.	Iviay 21, 2004
District II 1301 W. Grand Avc., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-02915 5. Indicate Type of Lease	FEDERAL
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE 🛛	FEE 🗌
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease	No.
1220 S. St. Francis Dr , Santa Fe, NM 87505		E-4200	
(DO NOT USE THIS FORM FOR PROPO	ICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit A CAVE POOL UNIT	greement Name
PROPOSALS)		8. Well Number 036	
1. Type of Well: Oil Well	Gas Well U Other	9. OGRID Number	
2. Name of Operator STATE OF NEW MEXICO FOR MARKS AND GARNER PRODUCTION LTD CO.		14070	
3. Address of Operator		10. Pool name or Wildcat	
P.O. BOX 70 LOVINGTON,	NM 88260	CAVE GB/SA	
4. Well Location]
	_feet from the _NORTH line and1980_feet from	-	
Section 8 Township 17S			
	11. Elevation (Show whether DR, RKB, RT, GR, etc.	.)	
Pit or Below-grade Tank Application []			•
	vater Distance from nearest fresh water well Dis		·
Pit Liner Thickness: mil		onstruction Material	
12. Check	Appropriate Box to Indicate Nature of Notice,	-	
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	PLUG AND ABANDON REMEDIAL WOR CHANGE PLANS COMMENCE DR	RILLING OPNS. P AND	RING CASING 🔲
OTHER:	□ OTHER:		П
13. Describe proposed or composed of starting any proposed wor recompletion. 4/23/09 - 5et	oleted operations. (Clearly state all pertinent details, ar ork). SEE RULE 1103. For Multiple Completions: A CIBP® 2332 - Circ Plugging @ 1975 - Hold PSI - SPOT 255 B 645 - Circ 2853x to half PA Marker - Clean up	ttach wellbore diagram of p Mud - 255x@ 2 x@ 2025'	· ·
grade tank has been/will be constructed or	a above is true and complete to the best of my knowledger closed according to NMOCD guidelines , a general permit	or an (attached) alternative OC	that any pit or below- D-approved plan □.
SIGNATURE Office	TITLE_AGENT	DATE5-15-09_	
Type or print name For State Use Only	E-mail address:	Telephon	e No.
	Approved for pluggin	kannenta la la la	1/21/2
APPROVED BY: Conditions of Approval (if any):		r OCD Was page	5/21/09