| Submit 3 Copies To Appropriate District   | State of New Me                  | Form C-103                              |  |             |                 |              |  |
|---|----------------------------------|---|--|-------------|-----------------|--------------|--|
| Office District I   | Energy, Minerals and Natur       |   | Revis  | sed May 08, | 2003            |              |  |
| 1625 N. French Dr., Hobbs, NM 87240   |                                  | WELL API NO.                            |  |             |                 |              |  |
| District II 1301 W. Grand Ave., Artesia, NM 88210   | OIL CONSERVATION DIVISION        |   | 30-015-33055                                     |             |                 | $\dashv$     |  |
| District III  | 1220 South St. Francis Dr.       |   | 5. Indicate Type of Lease                        |             |                 |              |  |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV   | Santa Fe, NM 8                   | STATE X FEE                             |  |             |                 |              |  |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505   |                                  |   | 6. State Oil & Gas<br>33039                      | s 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: State 1624 |             |                 |              |  |
| PROPOSALS.)   |                                  |   | 8. Well Number                                   |             |                 | <del> </del> |  |
| 1. Type of Well: Oil Well ☐ Gas Well 🗓  | Other                            |   | 291  |             |                 |              |  |
| 2. Name of Operator   |                                  | JUL 2 1 2004                            |  |             | 9. OGRID Number |              |  |
| Perenco LLC   |                                  |   | 218  | 3885        |                 |              |  |
| 3. Address of Operator  |                                  | SED-ARTESIA                             | 10. Pool name or                                 | Wildcat     |                 |              |  |
| 6 Desta Drive, Suite 6800 Midland, TX 79705   |                                  |   | Cottonwood Creek: Abo Gas                        |             |                 |              |  |
| 4. Well Location  |                                  |   |  |             |                 |              |  |
| Unit Letter C:  | feet from the Nor                | th line and                             | 1980 feet fro                                    | m the       | West            | line         |  |
| Section 29  |                                  | Range 24E                               | NMPM   | County      | Eddy            | ,            |  |
|   | 11. Elevation (Show whether      | <i>DR, RKB, RT,  GR, etc</i><br>99'  GR | c.)  |             |                 |              |  |
| 12. Check A   | ppropriate Box to Indicate       |   | Report, or Othe                                  | r Data      |                 |              |  |
| NOTICE OF INTE  |                                  | 1                                       | SEQUENT RE                                       |             | E.              |              |  |
| PERFORM REMEDIAL WORK   | PLUG AND ABANDON                 | REMEDIAL WORK                           |  |             | NG CASIN        | G 🗀          |  |
| TEMPORARILY ABANDON   | CHANGE PLANS                     | COMMENCE DRILLI                         | NG OPNS. 🔲                                       | PLUG A      |                 |              |  |
| PULL OR ALTER CASING  | MULTIPLE COMPLETION              | CASING TEST AND CEMENT JOB              |  | ADANU       | ONMENT          |              |  |
| OTHER:  | П                                | OTHER: Jet dry w                        | ith nitrogen                                     |             |                 | X            |  |
| 13. Describe proposed or complete   | ad aparations (Clearly state all |   | ***************************************          | including a | atimated de     |              |  |
| of starting any proposed work). or recompletion.  |                                  |   |  |             |                 |              |  |
| 7/16/04   |                                  |   |  |             |                 |              |  |
| Run in hole with coil tubi<br>at 400 scf/min. Reached 6<br>venting until natural gas  | 500' with coil tubing and        |   |  |             |                 |              |  |
|   |                                  |   |  |             |                 |              |  |
|   |                                  |   |  |             |                 |              |  |
|   |                                  |   |  |             |                 |              |  |
|   |                                  |   |  |             |                 |              |  |
|   |                                  |   |  |             |                 |              |  |
|   |                                  |   |  |             |                 |              |  |
|   |                                  |   |  |             |                 |              |  |
| I hereby certify that the information above   | :-                               |   | •  |             |                 |              |  |
| 2 /   |                                  |   |  |             |                 |              |  |
| SIGNATURE LISA HU   | at TIT                           | LE Regulat                              | ory Tech   | DATE        | 7/19/04         |              |  |
| Type or print name Lisa Hunt  |                                  |   | Telepl   | none No. 4  |                 |              |  |
| (This space for State use)  | FOR RECORDS ONLY                 | (                                       |  | J           | IUL 22          | 2004         |  |
| APPROVED BY   |                                  | TLE                                     | ]  | DATE        |                 |              |  |
| Conditions of approval, if any:   |                                  |   |  |             |                 |              |  |