

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
March 4, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. <u>30-015-23709-00-00</u>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <u>STATE MA COM</u>
8. Well Number <u>SWD #1</u>
9. OGRID Number <u>OK1690</u>
10. Pool name or Wildcat <u>BONE SPRING</u>

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 SWD

2. Name of Operator  
ST. MARY LAND & EXPLORATION Co.

3. Address of Operator  
580 WESTLAKE PARK BLVD. STE 600 HOUSTON, TX 77079

4. Well Location  
Unit Letter \_\_\_\_\_: 1930 feet from the NORTH line and 660' feet from the EAST line  
Section 3 Township 25S Range 28E NMPM EDDY County

11. Elevation (Show whether DR, RKB, RT, GR, etc.) RKB

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached) - NA

Pit Location: UL \_\_\_\_\_ Sect \_\_\_\_\_ Twp \_\_\_\_\_ Rng \_\_\_\_\_ Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_  
Distance from nearest surface water \_\_\_\_\_ Below-grade Tank Location UL \_\_\_\_\_ Sect \_\_\_\_\_ Twp \_\_\_\_\_ Rng \_\_\_\_\_;  
feet from the \_\_\_\_\_ line and \_\_\_\_\_ feet from the \_\_\_\_\_ line

12. 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 ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
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.

CHANGED OUT PACKER, TEST PC 8 7/8" TUBING IN HOLE AND RESET PACKER AT 7146'. ACIDIZED WITH 500 GALS OF 15% HCL AND FLOWED BACK. PERFORMED MIT TEST - CHART ATTACHED ON 5-15-04

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 Dennis L. Goins TITLE PROD. ENGINEER DATE 7/13/04

Type or print name DENNIS L. GOINS E-mail address: dgoins@STMARYLAND.COM Telephone No. 281-677-2774

(This space for State use)

Accepted for record - NMOCD

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JUL 23 2004  
Conditions of approval, if any: