

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
May 27, 2004

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

| | | |
|--|--|---|
| 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.) | | WELL API NO. 30-005-62232 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other | | 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 2. Name of Operator Warren E&P, Inc. | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator 123 West First Street, Suite 505, Casper, WY 82601 | | 7. Lease Name or Unit Agreement Name Mary K. |
| 4. Well Location Unit Letter <u>D</u> : <u>660</u> feet from the <u>North</u> line and <u>775</u> feet from the <u>West</u> line Section <u>29</u> Township <u>10S</u> Range <u>25E</u> NMPM Chaves County, NM | | 8. Well Number <u>1</u> |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3515' GR | | 9. OGRID Number 017470 |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> | | 10. Pool name or Wildcat Undes, Abo |
| Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ | | |
| Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____ | | |

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

| | |
|---|---|
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input checked="" type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/> | SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/> |
|---|---|

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.

1. MI rig
2. RU unit, NU B.O.P.
3. RIH w/tbg. To 3984', spot 35 sx 3898-3324'. WOC & tag.
4. Circ. hole w/ MLF
5. Pull tbg. To 1280', spot 25 sx
6. Pull tbg. To 824', spot 25 sx 824-724', WOC & tag
7. Pull tbg. To 297', spot 30 sx 297-surface
8. RDMO. Install dry hole marker & clean location

If this work requires an earthen pit, a permit must be approved prior to construction of the pit(s).

Notify OCD 24 hrs. prior to any work done

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 Scott Hedlund TITLE Environmental and Regulatory Affairs DATE 2-10-05

Type or print name Scott Hedlund E-mail address: shedlund@warrenep.com Telephone No. (307) 237-0864

For State Use Only

APPROVED BY: Phil Hawkins TITLE Field Supervisor DATE 2/18/05
Conditions of Approval (if any):