

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
Revised June 10, 2003

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

WELL API NO. 30-015-22001
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. KO 6527
7. Lease Name or Unit Agreement Name Eddy FV State
8. Well Number 2
9. OGRID Number 017985
10. Pool name or Wildcat Avalon Delaware

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 ☐

2. Name of Operator
Premier Oil & Gas, Inc.

3. Address of Operator
P.O. Box 1246, Artesia, NM 88211-1246 505-748-2093

4. Well Location
Unit Letter K : 1980 feet from the South line and 1980 feet from the West line
Section 25 Township 20S Range 27E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3317' GL

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: Add perforations to Delaware <input checked="" 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.

The following work is to begin 10/24/05:

1. Set a RBP @ 4540' w/sand on top of plug.
2. Pressure test csg to 2000 psi.
3. Perforate Delaware w/15 holes from 4068-4142'.
4. Acidize w/1000 gals. 7-1/2 % NEFE acid.
5. Frac w/23,000 gals of gel w/70,000 16/30 premium brown sand.
6. Retrieve RBP @ 4540' and produce Lower Brushy Canyon along w/Middle Brush Canyon.

Oper. To Use BOP control device / submit 380

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Rosalie Jones TITLE President DATE 10/21/05

Type or print name Rosalie Jones E-mail address: _____ Telephone No. 505-748-2093

(This space for State use)

APPROVED BY Jim W. Green TITLE District II Supervisor DATE NOV 02 2005

Conditions of approval if any: _____