

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

WELL API NO.

30-015-05713

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

E 6018

7. Lease Name or Unit Agreement Name

STATE

8. Well Number

2

9. OGRID Number

018862

10. Pool name or Wildcat

SHUGART

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

RAY WESTALL

3. Address of Operator

Box 4, Loco Hills NM 88255

4. Well Location

Unit Letter B : 330 feet from the NORTH line and 2310 feet from the EAST line  
Section 2 Township 19S Range 31E NMPM E004 County

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

3626 GL

Pit or Below-grade Tank Application ☐ or Closure ☐

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 \_\_\_\_\_

RECEIVED

APR 17 2006

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

UUU-ARTESIA

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☐

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.

SET CIBP @ 4050' (TOP OF PERFS) CAP w/ 35' CMT  
SPOT 100' CMT 3520-3620' (ACROSS 7" SHOE) TAG.  
SPOT 25 SXS 2475 (TOP YATES) Perf. & Sguz. TAG.  
SPOT 100' 860'-960' (8 5/8" SHOE) Perf & Sguz TAG.  
60' SURFACE PLUG Perf. & Sguz.  
HEAVY MUD BETWEEN ALL PLUGS

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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE

*[Signature]*

TITLE

GEOLOGIST

DATE

4/14/04

Type or print name

RANDALL HARRIS

E-mail address:

Telephone No. 677-2370

For State Use Only

APPROVED BY:

*[Signature]*

TITLE

24.

DATE

4/21/06

Conditions of Approval (if any):

RAY WESTALL  
STATE #2  
30-015-05713

