Submit 3 Copies 10 Appropriate District	State of New Mexico	Form C-103
Office District I	ergy, Minerals and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240		WELL API NO. 30-015-33532 29 30 31
District II 1301 W. Grand Ave., Artesia, NM 88210	IL CONSERVATION DIVISION	E To Conta Towns CT / C.
District III	1220 South St. Francis Dr.	STATE X /50 FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	6. State Oil & Gas Israse No. Pro 2000
1220 S. St. Francis Dr., Santa Fe, NM 87505		SE OCO CEIVER
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		Karlsbad Corral 2 State 28/219191919191919191919191919191919191919
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		Karlsbad Corral 2 State
1. Type of Well: Oil Well X Gas Well Other		8. Well Number 2-H
2. Name of Operator		9. OGRID Number 148111
Southwestern Energy Production Company		10 0
3. Address of Operator 2350 N. Sam Houston Pkwy., Ste. 300, Houston, TX 77032		10. Pool name or Wildcat Willow Lake, Delaware, SW 96855
		Willow Lake, Delaware, Sw 90833
4. Well Location		
Unit Letter O: 330 feet from the S line and 660 feet from the E line		
Section 2 Township 25S Range 29E NMPM County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3308' GR		
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		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:		
NOTICE OF INTENT	AND ABANDON REMEDIAL WO	JBSEQUENT REPORT OF: ORK
===		DRILLING OPNS. P AND A
	IPLE COMPL CASING/CEME	_
		_
OTHER:	OTHER:	and give pertinent dates, including estimated date
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.		
I continue was resummered and drug halo resultant was not for the Warlahad Council 2 State 2 IV will Don't for will be		
Location was resurveyed and dry hole marker was set for the Karlsbad Corral 2 State 2-H well. Ready for reinspection,		
t		
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 Lucy W	TITLE Production Analysi	DATE 07/20/2004
)	THE Floquetion Analys	DATE <u>07/28/2006</u>
Type or print name Lucy Ward E-mail ad	dress: lucy_ward@swn.com Telepł	none No. 281-618-4700
For State Use Only APPROVED BY: Conditions of Approval (if any): TITLE ACCEPTED TO DATE		
ADDDOVED DV.	TITLE A CONTROL	for tecore
APPROVED BY: Conditions of Approval (if any):	TITLE ACCEPTED NIM	DATE
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