

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.  
30-015-01211

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
B-1483-36

7. Lease Name or Unit Agreement Name  
South Red Lake Unit II

8. Well Number 35

9. OGRID Number  
241598

10. Pool name or Wildcat  
Red Lake Queen, Grayburg, San Andres

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 - Injector (X) ☒

2. Name of Operator  
Fairway Resources Operating, LLC

3. Address of Operator  
538 Silicon Drive, Suite 101, Southlake, TX 76092

4. Well Location

Unit Letter B: 330 feet from the North line and 2,310 feet from the West line

Section 2 Township 18S Range 27E NMPM Eddy County

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

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:

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

OTHER: ☐

SUBSEQUENT REPORT OF:

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

Repair Tubing Leak

MIRU pulling unit. Install BOP. Release packer and TOH with tbg.  
TIH with redressed pkr and new string of 2 3/8 IPC tbg.  
Circulate pkr fluid and set pkr  
Pressure test casing to 300 psi  
Return well to injection.

Notify OCD 24 hrs. prior to  
~~any work done.~~  
Pressure Test.

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 Cindy Flood TITLE Office Manager

DATE 02/15/07

Type or print name Cindy Flood

E-mail address: cflood@fairwayresources.com Telephone No. 817/416-1946

For State Use Only

APPROVED BY: Gerry Guye TITLE

Gerry Guye  
Deputy Field Inspector  
District II - Artesia

DATE FEB 23 2007

Conditions of Approval (if any):