

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. 30-025-06214 <b>30-15-21878</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

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.)		7. Lease Name or Unit Agreement Name Wright Federal Com
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	8. Well Number 1	
2. Name of Operator SOUTHWEST ROYLATIES, INC.	9. OGRID Number 21355	
3. Address of Operator 6 DESTA DRIVE, STE 2100, MIDLAND, TEXAS 79705	10. Pool name or Wildcat NORTH TURKEY TRACK MORROW	
4. Well Location Unit Letter <u>    </u> N <u>    </u> : <u>660</u> feet from the <u>SORTH</u> line and <u>1980</u> feet from the <u>WEST</u> line Section <u>29</u> Township <u>18S</u> Range <u>29E</u> NMPM LEA County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3455' gl		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type <u>    </u> Depth to Groundwater <u>    </u> Distance from nearest fresh water well <u>    </u> Distance from nearest surface water <u>    </u>		
Pit Liner Thickness: <u>    </u> mil Below-Grade Tank: Volume <u>    </u> bbls; Construction Material <u>    </u>		

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <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.

Plans are to run a capillary string in the wellbore and return well to production.

Procedures:

- 1) MI & RU pulling unit. POH w/plunger and production equipment.
- 2) Swab well dwn.
- 3) RIH w/capillary string.
- 4) Start foamer.
- 5) Run production equipment and return well to production.

Anticipate production in February. This well is a BLM /Federal well but is on the NMOCD SI Well Listing.

RECEIVED

FEB 11 2008

HOBBS OCD

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 Dawn M. Howard TITLE Operations Assistant DATE 2/4/08

Type or print name Dawn M. Howard E-mail address: dhoward@claytonwilliams.com Telephone No. 432/688-3267

For State Use Only

APPROVED BY:      TITLE      DATE     

Conditions of Approval (if any):

Accepted for record - NMOCD