

Submit 1 Copy 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
October 13, 2009

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

WELL API NO. 30-015-10450
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. XO647
7. Lease Name or Unit Agreement Name ADKINS WILLIAMS STATE
8. Well Number 001
9. OGRID Number 020989
10. Pool name or Wildcat ARTESIA;QUEEN-GRAYBURG-SA

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTION <input type="checkbox"/>	
2. Name of Operator SMITH & MARRS, INC.	
3. Address of Operator P.O. BOX 863 KERMIT, TX 79745	
4. Well Location Unit/Letter _____ O: _____ 10' feet from the _____ SOUTH _____ line and _____ 2577 feet from the _____ EAST _____ line Section 17 Township 18S Range 28E NMPM County EDDY	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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 ☐
DOWNHOLE COMMINGLE ☐

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1-6-09 POH WITH PACKER-RIH WITH REDRESSED PACKER-CIRCULATE PACKER FLUID-SET PACKER

1-27-10 TEST ANNULUS AND CHART--ORIGINAL CHART TAKEN TO OFFICE BY OCD (RICHARD)

MUST SPECIFY DEPTH OF PACKER.

RE 2/11/10

Spud Date:

Rig Release Date:

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

SIGNATURE Terri Jennings TITLE Production Analyst DATE 2-3-2010
Type or print name Terri Jennings E-mail address: jjennings@marjomarrs.net PHONE: 432-586-3076
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____