

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
Revised June 10, 2003

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

WELL API NO. 30-015-05670
5. Indicate Type of Lease Federal STATE ☐ FED ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name SHUBART B
8. Well Number 1
9. OGRID Number 21986
10. Pool name or Wildcat

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
SWR Operating Co

3. Address of Operator
200 Crescent CT, Dallas, TX.

4. Well Location

Unit Letter **1** : **330** feet from the **SE** line and **2310** feet from the **E** line

Section **33** Township **18S** Range **31E** NMPM County **EDD**

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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☒

CASING TEST AND 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.

6/1/04 MTRU. TAC. CSBP @ 2347' 255X CWT PLY. WUC TAG.

6/2/04. Tag @ 2201' Port. @ 2161' 353X CWT. PLY. WUC TAG.

**6/3/04. Tag @ 1916' Port @ 975' 255X CWT. Tag @ 723'
Port @ 675' 255X CWT.
Port @ 60' 4 5/8 + 5 1/2 CWT. Surface.**

6/4/04 well P/W.

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

SIGNATURE **Phil Hankins** TITLE **Field Inspector** DATE **7/8/04**

Type or print name E-mail address: Telephone No.

(This space for State use)

APPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any: