

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-015-01888
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>

6. State Oil & Gas Lease No.	B-11540
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7. Lease Name or Unit Agreement Name	Humble State
8. Well No.	5
9. Pool name or Wildcat	Artesia-QN-GR-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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> OTHER
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2. Name of Operator	Melrose Operating Co.
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3. Address of Operator	c/o P.O. Box 953, Midland, Texas 79702
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4. Well Location	Unit Letter <u>H</u> <u>1980</u> Feet From The <u>North</u> Line and <u>650</u> Feet From The <u>East</u> Line Section <u>16</u> Township <u>18S</u> Range <u>28E</u> NMPM <u>Eddy</u> County
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10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
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11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER <input checked="" type="checkbox"/> Casing Integrity Test - Well T/A

12. 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.
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As required by New Mexico Oil Conservation Division, the Humble State, Well #5 was tested to 500 psi on 10-19-04. This well is in temporary abandonment status.

Chart Attached.

Temporary Abandoned Status approved:
10-19-09

RECEIVED
NOV 11 2004
OCC-ARTESIA

I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE <u>Ann E. Ritchie</u>	TITLE <u>Regulatory Agent</u>
DATE <u>11-3-04</u>	
TYPE OR PRINT NAME <u>Ann E. Ritchie</u>	(432) TELEPHONE NO. <u>684-6381</u>

(this space for State Use)	
APPROVED BY <u>[Signature]</u>	TITLE <u>Field Rep ID</u>
DATE <u>DEC 1 2004</u>	
CONDITIONS OF APPROVAL, IF ANY:	

