

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

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

WELL API NO. <b>30-015-02314</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>K-1429</b>
7. Lease Name or Unit Agreement Name <b>HELEN</b>
8. Well Number <b>1</b>
9. OGRID Number <b>156206</b>
10. Pool name or Wildcat <b>MILLMAN 7R EAST</b>

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 <input type="checkbox"/>	7. Lease Name or Unit Agreement Name <b>HELEN</b>
2. Name of Operator <b>David G. Hammond</b>	8. Well Number <b>1</b>
3. Address of Operator <b>PO Box 1538 Artesia NM 88211</b>	9. OGRID Number <b>156206</b>
4. Well Location Unit Letter <b>A</b> : <b>990</b> feet from the <b>N</b> line and <b>330</b> feet from the <b>E</b> line Section <b>29</b> Township <b>19S</b> Range <b>28E</b> NMPM County <b>EDDY</b>	10. Pool name or Wildcat <b>MILLMAN 7R EAST</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3388 GR</b>	

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 ☐

SUBSEQUENT REPORT OF:

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

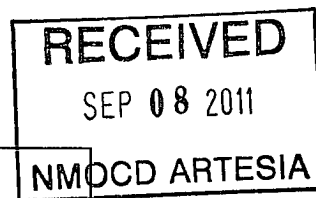
OTHER: ☒

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.

**monthly Production Report up to date. NEW WELL signs on order.**

\* well signs to be in place within 90 days.  
submit sundry.



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 David G. Hammond TITLE Owner/Operator DATE 9/6/2011

Type or print name David G. Hammond E-mail address: estefban2002@yahoo.com PHONE: 575-308-7662

For State Use Only

APPROVED BY: David Gray TITLE Field Supervisor DATE 9/20/11

Conditions of Approval (if any):

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