

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

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.)		WELL API NO.
1. Type of Well: Oil Well ☒ Gas Well ☐ Other		5. Indicate Type of Lease STATE ☒ FEE ☐
2. Name of Operator David G. Hammond		6. State Oil & Gas Lease No. 02318 02300 02310
3. Address of Operator PO Box 1538 Artesia NM 88211		7. Lease Name or Unit Agreement Name CAROLINE, Marylou
4. Well Location Unit Letter : feet from the line and feet from the line Section 29 Township 19S Range 28E NMPM County Edhy		8. Well Number 3, 4, 2
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 156206
		10. Pool name or Wildcat MILLMAN, 7R East

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: ☒

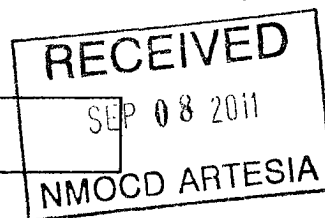
OTHER: ☐

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.

I want to Request an additional 30 days on completion of Rig work Because of Rig availability. a Roostabout CREW is working Daily, Cleaning, Replacing old pumping tees, and Removing old Equipment that has been stacked on one location for Removal. your consideration is greatly appreciated.

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:

TITLE

DATE

Conditions of Approval (if any):

Return to Production, or submit procedure to P&A no later than 12/20/11.