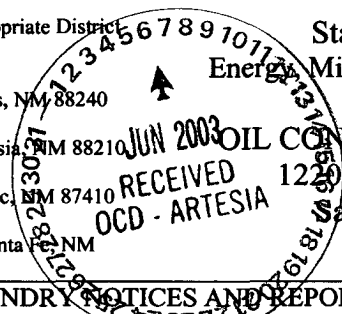


Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

5 Form C-103  
Revised May 08, 2003



WELL API NO. 30-015-23066
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 2943
7. Lease Name or Unit Agreement Name Conoco 10 State
8. Well Number 1
9. OGRID Number 023032
10. Pool name or Wildcat Parkway Wolfcamp

**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  
Threshold Development Corporation

3. Address of Operator  
777 Taylor St., Penthouse II, Fort Worth, TX 76102

4. Well Location  
Unit Letter 1 : 1980 feet from the South line and 660 feet from the East line  
Section 10 Township 19S Range 29E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3375' GR

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.

**LOWER WOLFCAMP**

- Pump 2% KCL water as necessary. Release packer and TOOH.
- RU lubricator on BOP stack. Correlate to Schlumberger CCL/CBL log dated 3/6/80. Casing gun perforate with 4" guns, .4" dia, 2 jsfp in the following interval:  
9,674' - 9,679' 12 shots  
9,612' - 9,620' 18 shots
- TIH with service packer and 2 3/8" tubing. Run 1.71" seating nipple one joint above packer. Set packer @ 9,650'. Swab fluid level down to 7,500'.
- Acidize via tubing. Do not release packer to spot acid. Acidize with 3,000 gallons 15% Iron control HCL carrying 50 7/8" 1.3 SG RCN ballsealers. Flush with 2% KCL water.
- Swab test for production or additional stimulation decision.

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

SIGNATURE Linda Brown TITLE Regulatory Assistant DATE 5/28/03

Type or print name Linda Brown Telephone No. 817-870-1483  
(This space for State use)

APPROVED BY Linda W. Brown TITLE District Supervisor DATE JUN 09 2003  
Conditions of approval, if any: