

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

Form C-103
May 27, 2004

WELL API NO.	015-26564
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	n/a
7. Lease Name or Unit Agreement Name	Malaga 36 State
8. Well Number	1
9. OGRID Number	012361
10. Pool name or Wildcat	Culebra Bluff South (Atoka)

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 Kaiser-Francis Oil Company

3. Address of Operator P. O. Box 21468, Tulsa, OK 74121-1468

4. Well Location
Unit Letter J: 1980 feet from the South line and 1980 feet from the East line
Section 36 Township 23S Range 28E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
2974 GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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 ☐

OTHER: Add perms to Atoka ☒

SUBSEQUENT REPORT OF:

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

1. MIRU WSU. POOH w/tbg.
2. Set CIBP @ 12000' w/20' cmt on top.
3. Perf additional Atoka @ 11904'-11914'.
4. Set packer @ 11890'. GIH w/tbg & latch into packer.
5. Swab test.
6. Acidize if needed w/1000 g. 15% NEFE.
7. Swab test.
8. If non-commercial, proceed to Wolfcamp recompletion.

Approximate starting date of workover: 02/20/07

DENIED

Please submit clog; clog
for recompletion

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE C. Van Valkenburg TITLE Technical Coordinator DATE 2/7/07

Type or print name Charlotte Van Valkenburg E-mail address: Charlotv@KFOC.net Telephone No. 918-491-4314

For State Use Only

BRYAN G. ARRANT

APPROVED BY: DISTRICT II GEOLOGIST TITLE _____ DATE FEB 13 2007

Conditions of Approval (if any):