Office State of New Mexico	Form C-103
District I. Energy, Minerals and National Re-	well API NO. May 27, 2004
District II	
1301 W Grand Ave Artesia NM 89010 WILL CUNSERVATION DIV	UN C. I. II. A. T. C. C.
District III 1000 Rio Brazos Rd., Aztec, NM 87410 CCD - ARTESA, NM Santa Fe, NM 87505	STATE FEE
District IV	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAC DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCF	
PROPOSALS.)	0 W-11 N1 2
1. Type of Well: Oil Well Gas Well Other P&A'D WELL BO	VC
2. Name of Operator SOUTHWEST ROYALTIES, INC.	9. OGRID Number 21355
3. Address of Operator	10. Pool name or Wildcat
6 DESTA DRIVE, STE 2100, MIDLAND, TEXAS 79702	NORTH BRUSHY DRAW DELAWARE
4. Well Location	
Unit Letter E: 1650 feet from the N line and	330feet from theWline
Section 36 Township 25 S R	ange 29E NMPM EDDY County
11. Elevation (Show whether DR, RKB,	RT, GR, etc.)
3034' GR Pit or Below-grade Tank Application or Closure	
	Distance from accused surface maker
Pit typeDepth to GroundwaterDistance from nearest fresh water well	
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:	SUBSEQUENT REPORT OF:
_	EDIAL WORK
	MENCE DRILLING OPNS.☐ P AND A ☐
PULL OR ALTER CASING MULTIPLE COMPL CASI	NG/CEMENT JOB
OTHER: OTHE	ER FINAL ABANDONMENT INSPECTION
13. Describe proposed or completed operations. (Clearly state all pertiner	
of starting any proposed work). SEE RULE 1103. For Multiple Com	pletions: Attach wellbore diagram of proposed completion
or recompletion.	
	10/04/00
Requesting inspection for final abandonment. Note attached C-103 a	pproved 8/21/00.
Well is still on current Inactive Well List.	
Accepted for	recørd
NMOCD	
I hereby certify that the information above is true and complete to the best of	
grade tank has been/will be constructed or closed according to NMOCD guidelines , a gen	y knowledge and helief I further certify that any nit or helow-
	y knowledge and belief. I further certify that any pit or beloweral permit □ or an (attached) alternative OCD-approved plan □.
CICNATURE CONTRACTOR OF THE CO	eral permit 🔲 or an (attached) alternative OCD-approved plan 🗌.
SIGNATURE Gum Montan TITLE	eral permit 🔲 or an (attached) alternative OCD-approved plan 🗌.
	eral permit or an (attached) alternative OCD-approved plan. Operations Assistant DATE 3/26/07
Type or print name Dawn M. Howard E-mail address: dhoward@clayto For State Use Only	eral permit or an (attached) alternative OCD-approved plan. Operations Assistant DATE 3/26/07
Type or print name Dawn M. Howard E-mail address: dhoward@clayto For State Use Only	onwilliams.com Telephone No. 432/688-3267
Type or print name Dawn M. Howard E-mail address: dhoward@clayto	eral permit or an (attached) alternative OCD-approved plan. Operations Assistant DATE 3/26/07