

Submit 3 Copies To Appropriate District  
 Office  
 District I  
 1625 N. French Dr., Hobbs, NM 87240  
 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

Form C-103  
 May 27, 2004

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



WELL API NO. 30-005-63917
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

**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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	NOV 28 2007	7. Lease Name or Unit Agreement Name: SMARTY JONES 1525-9
2. Name of Operator PARALLEL PETROLEUM CORPORATION	OCD-ARTESIA	8. Well Number 1
3. Address of Operator 1004 N BIG SPRING, SUITE 400, MIDLAND, TX 79701		9. OGRID Number
4. Well Location Unit Letter <u>A</u> : <u>760</u> feet from the <u>NORTH</u> line and <u>190</u> feet from the <u>EAST</u> line Section <u>8</u> Township <u>15S</u> Range <u>25E</u> NMPM County <u>CHAVES</u>		10. Pool name or Wildcat WILDCAT; WOLFCAMP
	11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR: 3539	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: SPUD, CSG, SURVEYS <input type="checkbox"/>	

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.

10-12-07: SET 16" CONDUCTOR @ 120  
 10-13-07: MIRU, SPUD @ 2200 HR  
 10-16-07: 8.625 CSG, 11" HOLE, 24# SET @ 1437  
 CMT: LEAD 450 SX HALLIBURTON LIGHT PP+5# GILSONITE+1% CACL+2%CFR-3, 12.4 PPG, 2.04 YLD  
 CMT: TAIL 395 SX HALLIBURTON PP+1% CACL, 14.8 PPG, 1.35 YLD  
 5 CENTRALIZERS  
 TOC: SURFACE, CIRCULATED 150 SX  
 WOC: 13 HRS, TEST CSG TO 1000 PSI FOR 30 MINUTES

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 Kaye McCormick TITLE SR PROD & REG TECH DATE 11-27-2007  
 E-mail address: kmccormick@plll.com  
 Type or print name KAYE MC CORMICK Telephone No. 432-685-6563

For State Use Only

APPROVED BY FOR RECORDS ONLY TITLE \_\_\_\_\_ DATE DEC 05 2007  
 Conditions of Approval, if any: