

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

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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.
7. Lease Name or Unit Agreement Name: SMARTY JONES 1525-9
8. Well Number 1
9. OGRID Number
10. Pool name or Wildcat WILDCAT; WOLF CAMP

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
2. Name of Operator PARALLEL PETROLEUM CORPORATION	OCD-ARTESIA
3. Address of Operator 1004 N BIG SPRING, SUITE 400, MIDLAND, TX 79701	
4. Well Location Unit Letter A : 760 feet from the NORTH line and 190 feet from the EAST line Section 8 Township 15S Range 25E NMPM County CHAVES	
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: