Submit 3 Copies To Appropriate District	State of New M	exico	Form C-103	
Office	Energy, Minerals and Nat	ural Resources	May 27, 2004	
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II	OIL CONSERVATION DIVISION		30-015-22055	
1301 W. Grand Ave., Artesia, NM 88210			5. Indicate Type of Lease	
District III	1220 South St. Francis Dr.		STATE FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM MAY 2 1 2008				
67303				
SUNDRY NOTION (DO NOT USE THIS FORM FOR PROPOSE DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	7. Lease Name or Unit Agreement Name Exxon State 8. Well Number #8			
1. Type of Well: Oil Well Gas Well Other SWD				
2. Name of Operator Mesquite SWD Inc.			9. OGRID Number 161968	
3. Address of Operator			10. Pool name or Wildcat Magruder Yates	
P.O. Box 1479 Carlsbad NM 88221				
4. Well Location				
ł	Coat from the	1:	C4 C 41	
	feet from the	line and	feet from the	ie
line				
Section 15	Township 21S	Range 27E	NMPM	County Eddy
	11. Elevation (Show whether DI			······································
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Pit or Below-grade Tank Application Or	· Closure			
Pit type Depth to Groundwa	terDistance from nearest fresh	water well Bioto	nne from nearest surface wa	ter
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
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NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK 🔼 PLUG AND ABANDON 🗌 REMEDIAL WORK			< ☐ ALTI	ERING CASING
TEMPORARILY ABANDON 📋	CHANGE PLANS	☐ COMMENCE DRILLING OPNS.☐ P AND A ☐		
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT		 ,
				
OTHER:		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) Run radioactive tracer and temperature suvey to what formation is taking produce water. 				
2) Mesquite would like to request a OCD feild person to witness test. 3) run test on 5-27-08 at 8:00am.				
TABLE IN A ST CLASSE BANGE				
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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 ASSIM	1997) TITLE TO	u n		
08	TITLE_	v.r		DATE5-21-
/				
Type or print name Clay L Wilson	•		Telephone No50	5-706-1840

For State Use Only