Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION

P.O. Box 1980, Hobbs, NM 88240 2040 Pacheco Santa Fe, NM		WELL API NO. 30-015-32639		
P.O. Drawer DD, Artesia, NM 88210		sIndicate Type of Lease	TATE F	EE
<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410		6State Oil & Gas Lease No.	IAIE F	<u> </u>
SUNDRY NOTICES AND REPORTS ON V (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEF DIFFERENT RESERVOIR. USE "APPLICATION FOR (FORM C-101) FOR SUCH PROPOSALS.)	7Lease Name or Unit Agreer Big Walt 2 State	nent Name		
1Type of Well: OIL GAS WELL X WELL OTHER	RECEIVED			
₂Name of Operator Nearburg Producing Company	NOV 1 2 7003	₃Well No. #7		
3Address of Operator C 3300 N A St., Bldg 2, Suite 120, Midland, TX 79705	OCD-ARTESIA	₃Pool name or Wildcat Indian Basin; Upper F	enn, Associated	
4Well Location Unit Letter M : 825 Feet From The South	Line and850	Feet From The	West Lir	ne
Section 2 Township 22S	Range 24E	NMPM Ed	ldy County	1
10Elevation (Show whether	DF, RKB, RT, GR, etc.)	9 (94.5) 19 (14.5)	Marian Marian Marian	
11 Check Appropriate Box to Indicate		•		
NOTICE OF INTENTION TO:	SUBS	SEQUENT REPOR	RT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	ALTE	ERING CASING	
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING O	PNS. PLUG	AND ANBANDONM	IENT
PULL OR ALTER CASING	CASING TEST AND CEME	ENT JOB		
OTHER:	OTHER: Prod csg and	d cmt		$ \times$
uzDescribe Proposed or Completed Operations (Clearly state all pertinent details, and work) SEE RULE 1103. Drid to 8322'. RU csg crew and ran 220 jts 7" N80 & S95 23# & 26 additives. Stage 2: 650 sxs Interfill C + additives and tail slurry w/ cmt @ 1500'. ND BOPE, set slips and cut off csg before plug down	6# csg. Set @ 8322'. Cmt of 100 sxs Premium Plus + a	csg as follows: Stage 1: dditives. No returns. Te	295 sxs 50/50 F	
time (green transfer and the control of the control				
I hereby certify that the information above is true and complete to the best of my known	owledge and belief. TITLE Production Analyst		TE 11-10-200	2
TYPE OR PRINT NAME Sarah Jordan	IIILE T TOUGCION Analysi		TE 11-10-2003	
(This space for State Like)	_			
APPROVED BY Sion W. Sum	THE District	Eugenicor DA	N8V 1 3	2003

CONDITIONS OF APPROVAL, IF ANY: