

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
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

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

MAY 19 2009

Form C-103  
May 27, 2004

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 )		WELL API NO. 30-015-25055
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease FEDERAL STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator STATE OF NEW MEXICO FOR MARKS AND GARNER PRODUCTION LTD CO.		6. State Oil & Gas Lease No. B-7596
3. Address of Operator P.O. BOX 70 LOVINGTON, NM 88260		7. Lease Name or Unit Agreement Name RED TWELVE STATE
4. Well Location Unit Letter <u>K</u> : <u>2310</u> feet from the <u>SOUTH</u> line and <u>1650</u> feet from the <u>WEST</u> line Section <u>5</u> Township <u>17S</u> Range <u>29E</u> NMPM County <u>EDDY</u> , NM		8. Well Number 006
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 14070
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat CAVE GB/SA
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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☒  
CASING/CEMENT JOB ☐

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.

4/29/09 - Set CIBP @ 2893' - Circ Plugging Mud - Spot 40 SX @ 2893'  
5/1/09 - Circ 75 SX to surface from 200'  
Install PA Marker - Clean up location

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 Mark Hook TITLE AGENT DATE 5-15-09

Type or print name

E-mail address:

Telephone No.

For State Use Only

APPROVED BY: Pat Harker TITLE \_\_\_\_\_

Conditions of Approval (if any):

Approved for plugging of well bore only.  
Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms. [www.emnrd.state.nm.us/oed](http://www.emnrd.state.nm.us/oed).

DATE 5/21/09