

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

AUG 11 2009

Form C-103
June 19, 2008

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

WELL API NO. 30-005-63779
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 AFFIRMED
8. Well Number 1
9. OGRID Number 230387
10. Pool name or Wildcat Wolfcamp (gas)

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	
2. Name of Operator PARALLEL PETROLEUM CORPORATION	
3. Address of Operator 1004 N. BIG SPRING STREET, SUITE 400, MIDLAND, TEXAS 79701	
4. Well Location Unit Letter <u>N</u> : <u>400'</u> feet from the <u>SOUTH</u> line and <u>1880'</u> feet from the <u>WEST</u> line Section <u>33</u> Township <u>14S</u> Range <u>26E</u> NMPM County <u>CHAVES</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3446' GR	

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 checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <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.

Gas well no longer produces. Will shut-in, temporarily abandon and research other uses for the wellbore.

WELL MUST PASS A MIT PRESSURE TEST BEFORE
IT CAN BE TA'D. CONTACT THE OCD TO ARRANGE
FOR THE TEST TO BE WITNESSED,

Spud Date: 12-31-05 Rig Release Date: 2-16-06

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Deane Durham TITLE Engineer DATE 8-4-09

Type or print name Deane Durham E-mail address: ddurham@plll.com PHONE: (432) 684-3727
For State Use Only

APPROVED BY: Richard Inge TITLE Compliance Officer DATE 8/11/09
Conditions of Approval (if any):