Office	f New Mexico	Form C-103
<u>District 1</u> Energy, Minerals and Natural Resources		June 19, 2008 WELL API NO.
1625 N French Dr., Hobbs, NM 88240 District II 1301 W Grand Ave. Artesia NM 88210 OIL CONSERVATION DIVISION		30-015-01904
1501 W Grand Ave, Artesia, Wivi 60210		5. Indicate Type of Lease
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd, Aztec, NM 87410		STATE S FEE
District IV 1220 S St Francis Dr, Santa Fe, NM Santa Fe, NM Santa Fe, NM Santa Fe, NM		6. State Oil & Gas Lease No. XO647
87505 SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(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)		GRARIDGE STATE 8. Well Number 003
1. Type of Well: Oil Well Gas Well Other	RECEIVED	
Name of Operator H. DWANE PARRISH JR		9. OGRID Number 009759
3. Address of Operator	OCT 15 2009	10. Pool name or Wildcat Artesia
1306 S. 9 TH ARTESIA, NM 88210	NMOCD ARTESIA	QUEEN; GRAYBURG, SAN ANDRES
4. Well Location	LINIVIOCO ANTESIA	
Unit Letter L : 2350 feet from the SOUTH line and 1050 feet from the WEST line		
11. Elevation (Show t	whether DR, RKB, RT, GR, etc.	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
12. Check Appropriate Box to indicate reature of Notice, Report of Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON		
PULL OR ALTER CASING		
DOWNHOLE COMMINGLE		
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.		
8-17-2009 Return well back to production		
/		
Soud Date:	Palaga Data:	
Spud Date: Rig	g Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE		
Type or print nameJerri Jennings E-mail address:jjennings@mayomarrs.net _ PHONE:432-586-3076		
For State Use Only		
APPROVED BY: DATE 10/22/2009 Conditions of		
Approval (if any): DATE 10/22/2004 Conditions of		
rapproved (it mit).		