

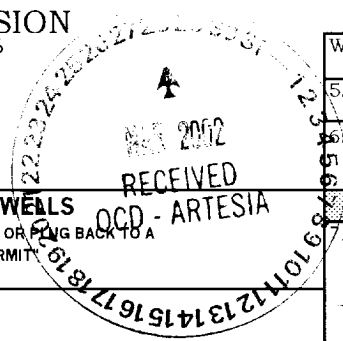
District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals, & Natural Resources Department

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

Form C-103
Revised 1-1-89

*CLSF
AP*



WELL API NO. 30-005-10071
5. Indicate Type of Lease STATE ☐ FEDERAL ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Sturgeon
8. Well No. 2
9. Pool name or Wildcat Linda San Andres

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 ☒ GAS WELL ☐ OTHER ☐	
2. Name of Operator M.E.W. Enterprise	
3. Address of Operator 300 S. Kentucky - Roswell, NM 88203	
4. Well Location Unit Letter F : 2310 Feet From The North Line and 2329 Feet From The West Line Section 33 Township 6S Range 26E NMPM Chaves County	
10. Elevation (Shoe whether DF, RKB, RT, GR, ect.) 3607	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐	REMEDIAL WORK ☐ ALTERING CASING ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐	COMMENCE DRILLING OPNS ☐ PLUG AND ABANDONMENT ☒
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER: ☐	OTHER: ☐

12. 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 **MIRU WSL 03-09-02 Remove production eqp. POOH w/ Rods & Tbs. Dump 1000# sand Trip in hole Tag 1010' mix & pump 7s/s cmt. Pull up & close hole w/ Boring containing 25# gell/BBL. Pull out of hole. Perf 150'. Trip in hole to 03-11-195' mix & pump 36s/s cmt close cmt to surface Between 8 1/8" - 4 1/2" csg. Pull out of hole Fill 4 1/2" csg with cmt to surface**

Post Per

13. I hereby certify that the information given above is true and complete to the best of my knowledge and belief.			
SIGNATURE Russell White	TITLE Authorized Agent	DATE 03-20-02	
TYPE OR PRINT NAME Russell White	TELEPHONE NO. (505)627-2065		
(This space for State Use)			
APPROVED BY [Signature]	TITLE Field Rep ID	DATE APR 12 2002	