

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

RECEIVED OIL CONSERVATION DIVISION  
OCD - ARTESIA  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

c15 E  
Form C-103  
Revised March 25, 1999

WELL API NO. 30-005-10165
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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.)		7. Lease Name or Unit Agreement Name: White #2
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		
2. Name of Operator Klabzuba Oil & Gas Inc.	8. Well No. N-18-10S-28E	
3. Address of Operator P.O. Box 40 Havre MT 59501	9. Pool name or Wildcat Wildcat	
4. Well Location Unit Letter _____ feet from the _____ line and _____ feet from the _____ line Section 18 Township 10S Range 28E NMPM County Chaves		
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		

11. 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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.			

Perform Mechanical integrity test. (See attached)  
well must be tested As per Rule 203

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

SIGNATURE Shannon Howland TITLE Receptionist DATE 2/20/02

Type or print name Shannon Howland Telephone No. (406) 265-9900  
(This space for State use)

APPROVED BY [Signature] TITLE Field Rep DATE MAR 5 2002  
Conditions of approval, if any:

1. Shut-in casing and bradenhead valve 24 hours prior to the scheduled date/time.
2. Have tubing-casing annulus loaded with inert fluid. Fluid level must be stable at the surface prior to test date.
3. **Pressure test annulus to a minimum of 300# for 15 minutes. If there is *no* pressure loss during the first 15 minutes, the test will be complete. However, if there is pressure loss during the first 15 minutes, the test will be continued for a total of 30 minutes with a 10% pressure drop-off permitted. Pressure drop-offs over 10% are considered a failure. All wells that fail must be repaired within ninety (90) days from the test failure date.**
4. Have continuous recording pressure chart with maximum two-hour clock.
5. Have wellhead prepared for test. Valves should be in working order.
6. Have manpower and truck available for pressure test.
7. Well should be injecting for the duration of the test.