Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

WELL API NO.
30005-60521

5. Indicate Type of Lease
   STATE ☒   FEE ☐

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.)

1. Type of Well:
   Oil Well ☐   Gas Well ☐   Other   Injection

7. Lease Name or Unit Agreement Name:

   Twin Lakes San Andres Unit

2. Name of Operator
Concho Oil & Gas Corp.

7. Well No.
                                27

3. Address of Operator
110 W. Louisiana Ste 410; Midland, Tx 79701

8. Pool name or Wildcat
Twin Lakes; San Andres (Assoc)

4. Well Location

   Unit Letter   G :   2310   Feet from the   North   line and   2310   feet from the   East   line

   Section   36   Township 8S   Range   28E   NMPM   Chaves   County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
   3942 GR

11. 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 COMPLETION ☐

OTHER: Run Step Rate Test ☒

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐   ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐   PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Concho Oil & Gas Corp. respectfully requests approval to run a step rate test on the Twin Lakes San Andres Unit No. 27 well.

It is our intent to run the step rate test to determine if an increase in injection pressure is warranted.

OCT 2001
RECEIVED
OCD - ARTESIA

Notify OCD 24 hrs. prior to any work done

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

SIGNATURE _____ TITLE _Production Analyst_ DATE   10-17-01

Type or print name   Terri Stathem   Telephone No. 915/685-7443

(This space for State use)

APPPROVED BY _____ TITLE _____ DATE 10-31-01
Conditions of approval, if any: