

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 87210  
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  
OIL CONSERVATION DIVISION  
1220 South St. Francis  
Santa Fe, NM 87505

Form C-103  
Revised March 25, 1999

WELL API NO. 30-005-61152-61151  
5. Indicate Type of Lease  
STATE ☒ FEE ☐  
6. State Oil & Gas Lease No.  
LG-566-1  
7. Lease Name or Unit Agreement Name:  
Grynberg 16 State  
8. Well No.  
3  
9. Pool name or Wildcat  
Abo

**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  
Jack J. Grynberg /  
3. Address of Operator  
5299 DTC Blvd., Suite 500 Greenwood Village, CO 80111  
4. Well Location  
Unit Letter E : 1980 feet from the North line and 660 feet from the West line  
Section 16 Township 5S Range 24E NMPM County Chaves  
10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
4021 KB

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: ☐  
**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.

See attached reports.

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

SIGNATURE Ken McKinney TITLE Prod. Manager DATE 7/30/2002

Type or print name Ken McKinney Telephone No. 303-850-7490  
(This space for State use)

APPROVED BY [Signature] TITLE Wildcat ID DATE JAN 10 2003  
Conditions of approval, if any

Post Pet