

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANITARY		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

API# 30-005-63035

5a. Indicate Type of Lease	
State ☐	Fee ☒
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO ABANDON OR TO CORRECT OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT TO ABANDON (FORM C-101) FOR SUCH PROPOSALS.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER- <u>Dry Hole</u>		7. Unit Agreement Name
2. Name of Operator <u>Primero Operating Inc.</u>		8. Farm or Lease Name <u>Moriah</u>
3. Address of Operator <u>PO Box 1433, Roswell, NM 88202-1433</u>		9. Well No. <u>1</u>
4. Location of Well UNIT LETTER <u>A</u> <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>349</u> FEET FROM THE <u>East</u> LINE, SECTION <u>18</u> TOWNSHIP <u>10-S</u> RANGE <u>29-E</u> NMPM.		10. Field and Pool, or Wildcat <u>Wildcat Devonian</u>
15. Elevation (Show whether DF, RT, CR, etc.)		12. County <u>Chaves</u>

16. 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 ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	OTHER ☐

17. 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.

01/25 Plugged well as follows:

- plug 1 - 45 sx 8330-8230
- plug 2 - 45 sx 7175-7075
- plug 3 - 45 sx 5770-5670
- plug 4 - 45 sx 3470-3370
- plug 5 - 45 sx 2245 tagged @ 2100'
- plug 6 - 35 sx 1052-952
- plug 7 - 10 sx 30 to surface

We will install Dry hole marker and clean and level location pursuant to NMOC.D Rules and Regs.

*Per FD-2
3-24-95
Per*

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

SIGNED [Signature] TITLE President DATE 02/01/95

APPROVED BY [Signature] TITLE DATE 9-6-15

CONDITIONS OF APPROVAL, IF ANY: