State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

C15r

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-005-63263

5. Indicate Type of Lease STATE ☒ FEE ☐

6. State Oil & Gas Lease No. 26232

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

Willow Spring "27" State

1. Type of Well:
OIL WELL ☐   GAS WELL ☒   OTHER

2. Name of Operator
Reliance Energy, Inc.

8. Well No.
1

3. Address of Operator
P.O. Box 10946, Midland, Texas 79702

9. Pool name or Wildcat
Undes.

4. Well Location

Unit Letter __L__ : __1980__ Feet From The __South__ Line and __660__ Feet From The __West__ Line

Section __27__   Township __4S__   Range __25E__   NMPM   Chaves County

RECEIVED OCD ARTESIA

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3797' 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 ☐
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.

3-14-01   Ran 22 jts 11-3/4" 42#, K-55, ST&C csg to 978' w/insert float @ 943'.
Cemented csg w/450 sxs 35/65 Poz "C" w/6% gel and 200 sxs Class "C"
w/2% CaCl. Circ 136 sxs to pit. WOC 18 hrs.

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

SIGNATURE _Peggy Abernathy_   TITLE __Agent__   DATE _3-15-01_

TYPE OR PRINT NAME __Peggy Abernathy__   TELEPHONE NO. (915) 683-4816

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

APR 04 2001

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: