

Submit 3 Copies To Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 87240

District II

811 South First, Artesia, NM 87210

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.  
30-005-63264

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
26233

7. Lease Name or Unit Agreement Name:

Willow Spring "29" State

8. Well No.  
2

9. Pool name or Wildcat  
Undes. Pecos Slope 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  
Reliance Energy, Inc.

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

4. Well Location  
Unit Letter H : 1980 feet from the North line and 660 feet from the East line

Section 29 Township 4S Range 25E NMPM County Chaves

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3858' GL

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 recompletion.

9-30-00

Ran 102 jts 5-1/2" 15.5#, J-55, LT&C Csg to 4250'  
w/400 sxs 50/50 Poz "C" w/2% gel and 5% salt.  
No cement to surface. WOC. 10-1/4 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 10/2/00

Type or print name Peggy Abernathy Telephone No. 683-4816

(This space for State use)

APPROVED BY Fer Record Only TITLE  DATE

Conditions of approval, if any:

NOV 08 2000