CIST

Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources District I Revised March 25, 1999 1625 N. French Dr., Hobbs, NM 87240 WELL API NO. District II 30-005-63290 OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410 STATE XX FEE Santa Fe, NM 87505 District IV State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 26781 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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 Willow Spring "23" State Name of Operator 8. Well No. Reliance Energy, Inc. Address of Operator 9. Pool name or Wildcat P.O. Box 10946 Wildcat (Abo) Well Location 1980 Unit Letter feet from the North line and 1980 feet from the West Section Township 4S Range 25E **NMPM** County Chaves 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3833' GR 11. 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 MULTIPLE CASING TEST AND COMPLETION **CEMENT JOB** OTHER: 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. Ran 96 jts 5-1/2" 15.5#, J-55, LT&C csg to 4092' w/float 11-27-00 collar @ 4049. Cement csg w/400 sxs 50/50 Poz "C" w/2% gel and 5% salt 3 4567 11-28-00 Cmt bridge off w/19# still in csg. Csg moved up hole to place csg @ 4072 w/FC @ 4030'. WOC 18 hrs. TD 4100' I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE_ TITLE Type or print name Peggy Abernathy Telephone No. 683-4816 (This space for State use) ORIGINAL SIGNED BY **DISTRICT II SUPERVISOR**

APPPROVED BY

Conditions of approval, if any: