

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.
30-005-63292

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
26782

7. Lease Name or Unit Agreement Name:

Willow Spring "22" State

8. Well No.
2

9. Pool name or Wildcat
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 D : 660 feet from the North line and 660 feet from the West line

Section 22 Township 4S Range 25E NMPM County Chaves

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
3826 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 ☐ 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.

11-1-00 Ran 45 jts 8-5/8" 24#, K-55, ST&C csg to 1940' w/IF @ 1906'. Cmt w/350 sx 35/65 Poz "C" w/6% gel and 100 sxs Class "C" w/2% CaCl. Circ 21 sxs to pit. WOC 10 hrs

11-2-00 WOC 8 hrs. Total 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 11/14/00
(915)

Type or print name Peggy Abernathy Telephone No. 683-4816
(This space for State use)

APPROVED BY ORIGINAL SIGNED BY TIM W. GUM DATE NOV 17 2000
Conditions of approval, if any: DISTRICT II SUPERVISOR