

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Er. , Minerals and Natural Resources Departmen

Form C-103
Revised 1-1-89

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.
30-005-63300

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
26826

7. Lease Name or Unit Agreement Name
Willow Spring "15" State

8. Well No.
2

9. Pool name or Wildcat
Wildcat (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 2-F : 1980 Feet From The North Line and 1980 Feet From The West Line

Section 15 Township 4S Range 25E NMMP Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3810' 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.

12-11-00 Spud 14-3/4" hole @ 1:15 p.m. on 12-11-00.



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 12/13/00
(915)

TYPE OR PRINT NAME Peggy Abernathy

TELEPHONE NO. 683-4816

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

APPROVED BY [Signature] TITLE _____ DATE DEC 18 2000

CONDITIONS OF APPROVAL, IF ANY: