State of New Office State of New Energy, Minerals and N 1625 N. French Dr., Hobbs, NM 88240	
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM	rancis Dr. STATE STATE
SUNDRY NOTICES AND REPORTS ON WEI (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-10) PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	J.R. Holts (NCT-C) Gas Com 8. Well Number 2
2. Name of Operator Morexco	9. OGRID Number 15262
3. Address of Operator P.O. Box 1591 Roswell, NM	10. Pool name or Wildcat
4. Well Location	
Unit Letter P 1190 feet from the	Inc and $\frac{1195}{}$ feet from the $\frac{E}{}$ line
Section 5 Township 195	Range 37e NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3693.8 GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐	
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS. PLUG AND
PULL OR ALTER CASING	ABANDONMENT CASING TEST AND CEMENT JOB
OTHER:	OTHER:
13. 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. Operator proposes to plug & abandon the above well as follows: 1.) Pull tubing & rods 2.) CIBP @ 3740 & cap with 35' of cement (5 1/2, 15.5# Casing) 3.) CIBP @ 2740 & cap with 35' of cement 4.) TIH & load hole with 9.5# gel 5.) Spot 100' plug @ 1475 (In & out of surface shoe) 6.) Set 10 sx surface plug 7.) Cut off well head & set dry hole marker 8.) Cut anchors & clean up location	
6.) Set 10 sx surface plug 7.) Cut off well head & set dry hole marker	
8.) Cut anchors & clean up location	
Thereby certify that the information above is true and complete to the best of my knowledge and belief.	
	President DATE 4-8-04
Type or print name	Telephone No.
(This space for State use)	ELD REPRESENTATIVE IL/STAFE MANA PARTIES 1 5 2004
APPPROVED BY HOLD WILL STAFF MANAGER 1 5 2004 Conditions of approval, if any	

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.