

Submit 3 Copies To Appropriate District Office  
**District I**  
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 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
March 4, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-10501	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Langlie Mattix Penrose Sand Unit	
8. Well Number #381	
9. OGRID Number 224376	
10. Pool name or Wildcat Langlie Mattix 7R-QN-Gb	

**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 Water Injection Well

2. Name of Operator  
Moriah Resources, Inc.

3. Address of Operator  
P.O. Box 5562 Midland, TX 79704

4. Well Location  
Unit Letter D : 660 feet from the North line and 660 feet from the West line  
Section 28 Township 22S Range 37E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3354' GR

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL      Sect      Twp      Rng      Pit type      Depth to Groundwater      Distance from nearest fresh water well       
Distance from nearest surface water      Below-grade Tank Location UL      Sect      Twp      Rng      ;  
     feet from the      line and      feet from the      line

12. 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: Returned well to active injection ☒

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.

1. Laid new injection line to well.
2. Pressure tested casing to 500# for 30 min., held good. -10/30/01
3. Put well on injection 5/24/04

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Paul T. Horne TITLE Operations Manager DATE 5/21/04  
Type or print name Paul T. Horne E-mail address: Paul@petroleumstrategies.com Telephone No. 432-682-0292

(This space for State use)

APPROVED BY Kay Wink TITLE QC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JUL 02 2004  
Conditions of approval, if any

