| Submit 3 Copies To Appropriate District Office | State of | Form C-103 | | | | | | |
|---|--|---------------------------------------|------------------------------------|--|--|---|----------|--|
| <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals | aral Resources | Revised June 10, 2003 WELL API NO. | | | | | |
| <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSERV | 30-041-10149 | | | | | | |
| District III | 1220 South | 5. Indicate Type of Lease STATE FEE X | | | | | | |
| District IV | Rio Brazos Rd., Aztec, NM 87410 ict IV Santa Fe, NM 87505 | | | | STATE FEE X 6. State Oil & Gas Lease No. | | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | | | | | |
| 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.) | | | | 7. Lease Name or Unit Agreement Name MILNESAND UNIT | | | | |
| 1. Type of Well: | | | | | umber | | ٦ | |
| Oil Well Gas Well X Other INJECTION | | | | | 26 | | | |
| 2. Name of Operator THOMPSON, J. CLEO | | | | 9. OGRID Number 11181 | | | | |
| 3. Address of Operator P.O. BOX 12577 ODESSA, TX 79768 | | | | | 10. Pool name or Wildcat MILNESAND (SANANDRES) | | | |
| 4. Well Location | | | | | (| | _ | |
| Unit Letter P : | feet from the | SOUTH | line and | 560 | feet from the | EAST line | • | |
| Section 19 | Township 8S | | ange 35E | NMPM | Coun | ty ROOSEVELT | ٠ | |
| | 11. Elevation (Show will 4220' GL | hether DR | k, RKB, RT, GR, etc | c.) | | | 1 | |
| 12. Check A | | ndicate N | lature of Notice | Report or | Other Data | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, NOTICE OF INTENTION TO: | | | | SEQUENT REPORT OF: | | | | |
| PERFORM REMEDIAL WORK | ERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WO | | | | | RING CASING | | |
| TEMPORARILY ABANDON | CHANGE PLANS | | COMMENCE DRI | LLING OPNS | | | | |
| PULL OR ALTER CASING | MULTIPLE COMPLETION | | CASING TEST AN CEMENT JOB | ID | BANI | DONMENT | | |
| OTHER: | | | OTHER: | A | | P | _ | |
| 13. Describe proposed or comp | leted operations. (Clearly | y state all | pertinent details, an | d give pertine | ent dates, inclu | ding estimated da | – ate | |
| of starting any proposed wo or recompletion. 1. WELL WAS SLIM HOLED I | | For Multip | le Completions: At | tach wellbore | e diagram of pr | oposed completion | on | |
| s., | · | | | | | | | |
| 2. WELL TO BE TEMPORIARI | LY ABANDONED | | A | | | 200 | | |
| 3. 4 1/2 9.5 # CASING SET @ 4 | 800', PBTD @ 4760'. | 4/15 | 104 | | /352120 | , 25 30 37 | | |
| 4. 132 JTS 2 1/16" IJ 10RD IPC | TBG AND TPL PACKE | R SET @ | 4236'. PERFS @ 4 | 658 - 4718') | | | | |
| | | | | .,10) | | \$ 22 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | ļ | |
| | | | | | 13 8 | 399 | | |
| | SUMMED OA | | | | 180 4 | | ! | |
| THE COMMISSION MUST BE | CHANING OF THE | A | al of Tempora | n. 1 1 | | | | |
| HOURS PRIOR TO THE BE PLUGGING OPERATIONS FO | | | ent Expires | 4/15/6 | 99 | | | |
| TO BE APPROVED. | Abai | 10011110 | THE EXPHOREMENT | -1.1 | 1000 | and the second | | |
| I hereby certify that the information a | boye is true and complet | e to the be | est of my knowledge | and belief. | | | | |
| SIGNATURE JOHN Q | // / | | RODUCTION FOR | | DATI | E 06/22/2004 | | |
| Type or print name JOHN HUGHES | E-mail address: | | | Telephone No. (432)634-8403 | | | | |
| (This space for State use) | 1 1/ | | | | | | | |
| APPPROVED BY Lau | wink | OC FIELD | REPRESENTATIV | E II/STAFF A | MANAGE J MATE | UN 2 8 2004 | | |
| Conditions of approval, if any | | | | | | | | |
| V | | | | | | | | |

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