

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

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

Form C-103
May 27, 2004

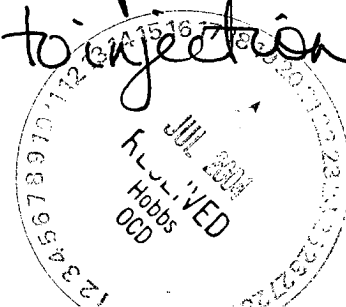
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-35672
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> INJ		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Texland Petroleum-Hobbs, L.L.C.		6. State Oil & Gas Lease No. 25696
3. Address of Operator 777 Main #3200, Plover, Tx. 76102		7. Lease Name or Unit Agreement Name State 129
4. Well Location Unit Letter P : 140 feet from the South line and 1200 feet from the EAST line Section 29 Township 18S Range 38E NMPM County Lea		8. Well Number 7
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3647'		9. OGRID Number
10. Pool name or Wildcat Hobbs: Upper Blinberry		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type NA Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

Pumped 4637 bbls marcit polymer gel into
perfs 5891-5960. Surface pressure began at
25 psi on 6/25/04 and ended at 1080 psi on
7/1/04. 7 days ÷ return well to injection
on 7/9/04 at 8AM.



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 OGD-approved plan ☐.

SIGNATURE **Diane Harber** TITLE **Regulatory Assistant** DATE **7.16.04**
Type or print name **Diane Harber** E-mail address _____ Telephone No. **817-336-2751**
For State Use Only

APPROVED BY: **Gary W. Wink** TITLE **OC FIELD REPRESENTATIVE II/STAFF MANAGER** DATE **JUL 23 2004**
Conditions of Approval (if any): _____