Submit Acopies To Appropriate District	State of New			Form C-103	
Office District I	Energy, Minerals and Na	itural Resources		Revised May 08, 2003	
1625 N. French Dr., Hobbs, NM 87240			WELL API NO.		
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION			30-025-08817 5. Indicate Type of Lease		
District III 1220 South St. Francis Dr.					
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV			STATE X	FEE L	
1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas	Lease No.	
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	7. Lease Name or Unit Agreement Name: STATE A A/C 2				
1. Type of Well: Oil Well ☐ Gas Well ☒ Other			8. Well Number	8. Well Number	
2. Name of Operator			9. OGRID Number		
MISSION RESOURCES CORPORATION			148381		
3. Address of Operator			10. Pool name or Wildcat		
1331 LAMAR. SUITE 1455 HO	JALMAT: TAN, YATE	S.7-RVRS(GAS) 79240			
Unit Letter A :	660 feet from the	NORTH line and	660 feet from	n the <u>EAST</u> line	
Section 7	Township 22S	Range 36E	NMPM	County LEA	
Section /	11. Elevation (Show wheth			County LEA	
		510' G.L.			
12. Check A	ppropriate Box to Indica	ate Nature of Notice	Report, or Other	Data	
NOTICE OF INTE	ENTION TO:	SUE	SEQUENT REP	PORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		X	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL	ING OPNS. 🔲	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB		ABANDONIVIEN	
OTHER:		OTHER:			
 Describe proposed or complete of starting any proposed work). or recompletion. 	ed operations. (Clearly state SEE RULE 1103. For Mult	all pertinent details, and iple Completions: Attacl	give pertinent dates, in wellbore diagram of	ncluding estimated date proposed completion	
07/21/04 - 07/29/04					
MIRU. Pulled tbg. RBP @ 12" of control valve from Tagged RBP @ 3451'. Left	RBP. Attempted to fish	remaining control v	/alve - no success	head & 31 s, 5 Milled over RBP.	
WellBore Schematic Enclose	d.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	AUG (1897) AUG (1	
				05.61.81.71.31.21.41.cs.fg.	
I hereby certify that the information above	is true and complete to the best	of my knowledge and belie	f.		
SIGNATURE / MC/	Matti T	TTLE Regulatory	Coordinator	DATE <u>08/09/04</u>	
Type or print name Namey K. Gatt			Telepho	one No. 713-495-3128	
(This space for State use)	OC FIELD	REPRESENTATIVE II/	STAFF MANAGER		
APPROVED BY Jayli	J. Wink .	TITLE	D	ATE	
Conditions of approval, if any				AUG 1 2 2004	

