| Submit 3 Copies To Appropriate District Office Stat                         | State of New Mexico                    |                                |                              | Form C-103                      |  |
|---|--|--------------------------------|------------------------------|---------------------------------|--|
| District I Energy, Mine   | Energy, Minerals and Natural Resources |                                | WELL API NO                  | Revised June 10, 2003           |  |
| 1625 N. French Dr., Hobbs, NM 88240   |  |                                |                              | 0.                              |  |
| District II 1301 W. Grand Ava. Artasia NIM 88210 OIL CONS                   | OIL CONSERVATION DIVISION              |                                |                              | 6516 36682                      |  |
| 1301 W. Olaila 110., Altesia, 1401 00210                                    | 1220 South St. Francis Dr.             |                                |                              | pe of Lease                     |  |
| 1000 Dia Degras Dd. Agree NIM 97410   | Santa Fe, NM 87505                     |                                |                              | FEE A                           |  |
| District 1 v  | ia re, mivi o                          | 7303                           | 6. State Oil &               | Gas Lease No.                   |  |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505                              |  |                                |                              |                                 |  |
| SUNDRY NOTICES AND REPORT   | S ON WELLS                             | 3                              | 7. Lease Nam                 | e or Unit Agreement Name        |  |
| (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     |  |                                | McNeill                      |                                 |  |
| PROPOSALS.) 1. Type of Well:  |  |                                | 8. Well Numb                 | er                              |  |
| Oil Well Gas Well A Other   |  |                                | 3                            |                                 |  |
|   |  |                                | - CONTRACT                   |                                 |  |
| 2. Name of Operator L.E. Jones Operating, Inc.                              |  |                                | 9. OGRID Nu<br>180930        | mber                            |  |
|   |  |                                |                              | XXY'1 1                         |  |
| 3. Address of Operator P.O. Box 1185, Duncan, OK 73534                      |  |                                | 10. Pool name<br>Nadine;Drin |                                 |  |
| 4. Well Location  |  |                                | Naume,Dim                    | Kalu/Abb                        |  |
| 4. Well Location  |  |                                |                              | ,                               |  |
| Unit Letter C: 805 feet from  | n the North                            | line and                       | 2269 fact                    | from the <u>East West</u> line  |  |
| Offit Letterieet from   | 1 tile                                 |                                |                              | from the West the               |  |
| Section 33 Townsh   | in 19S R                               | ange 38E                       | NMPM Lea                     | a County                        |  |
|   |  | R, RKB, RT, GR, etc.           |                              | County                          |  |
| 3584' GL  | ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , 1010, 111, 511, 610.         | /                            |                                 |  |
| 12. Check Appropriate Box   | to Indicate N                          | Jature of Notice               | Report or Oth                | per Data                        |  |
| NOTICE OF INTENTION TO:   | to marcate r                           |                                |                              | REPORT OF:                      |  |
| PERFORM REMEDIAL WORK PLUG AND ABAN   | DON []                                 | REMEDIAL WOR                   |                              |                                 |  |
| PERFORM REMEDIAL WORK PLUG AND ABAN   |  | REMEDIAL WOR                   | (K [                         | ALTERING CASING                 |  |
| TEMPORARILY ABANDON ☐ CHANGE PLANS  |  | COMMENCE DR                    | II I ING OPNS 🔯              | PLUG AND                        |  |
|   |  | ABANDONMENT                    |                              |                                 |  |
| PULL OR ALTER CASING   MULTIPLE   |  | CASING TEST AND                |                              |                                 |  |
| COMPLETION  |  | CEMENT JOB                     |                              |                                 |  |
| OTHER:  |  | OTHER:                         |                              |                                 |  |
|   |  | <u>i</u>                       | <del> </del>                 |                                 |  |
| 13. Describe proposed or completed operations. (C                           | learly state all                       | pertinent details, an          | d give pertinent             | dates, including estimated date |  |
| of starting any proposed work). SEE RULE 110                                | 03. For Multip                         | ole Completions: At            | tach wellbore dia            | agram of proposed completion    |  |
| or recompletion.  |  |                                |                              |                                 |  |
| Spud Date 5-4-04  |  |                                |                              |                                 |  |
|   |  |                                |                              | 1710                            |  |
| Surface Casing Date 5-6-04<br>Ran 37 jts 8-5/8" J-55 32.00# STC Set @       |  |                                | \n\sqrt{\alpha}              | 6161/1879203                    |  |
| Ran 37 its 8-5/8" I-55 32 00# STC Set @                                     | 1660' Cem                              | ented w/ 475 sv                | Halliburton                  | ite Prem Plus & 320 sx          |  |
| Dram Dlvg vv/ 20/ CCI   Cinc 100 cv to mi                                   | 1000 . Cen                             | - (a) 7.00 AM 5                |                              | and Flein Flus 65320 sx         |  |
| Prem Plus w/ 2% CCL. Circ. 109 sx to pi                                     | t. Plug dow                            | n @ 7:00 AM 5-                 | 6-04. W.UC I                 | 200 84 ~ A 33                   |  |
|   |  |                                | 27                           | 30,76                           |  |
| Production Casing Date 5-24-04  |  |                                | \(\frac{0.10}{0.10}\)        | (31° 1111 65)                   |  |
| Ran 160 jts 5-1/2" J-55 17# LTC Set @ 7                                     | 400'. Ceme                             | nted w/ 1135 sx                | InterFill® an                | d 585 x Premium/Poz             |  |
| w/ 0.5% I AP-1 0.4% CFR-3& 5#/sk KC   | Circ 95                                | ex to pit Plug de              | $\frac{1}{2}$                | M 5 22 04 WAGC 12               |  |
| h-a   | b. Circ. 73 i                          | sk to pit. I fug ti            | own w 8.0001                 | 101 3-23-04. Yage 12            |  |
| w/ 0.5% LAP-1, 0.4% CFR-3& 5#/sk KC.<br>hrs.                                |  |                                |                              | E51-1E0E0                       |  |
|   |  |                                |                              |                                 |  |
|   |  |                                |                              |                                 |  |
| I hereby certify that the information above is true and got                 | Anlata to the 1-                       | agt of my len1-1-              | a and halfae                 |                                 |  |
| Thereby certify that the information above is true and on                   | There is the po                        | est of my knowledge            | e and benef.                 |                                 |  |
| SIGNATURE A KINK DEEMMONK   | / TITLE                                | Production Engine              | or .                         | DATE 07/02/04                   |  |
|   | 11166                                  |                                |                              | DATE07/02/04                    |  |
| Type or print name Dan W. Hammond   | E-mail a                               | auress.                        | d@texhoma.net                | Telephone No. 580-255-119       |  |
| (This space for State use)  |  | THE CLOMEN                     | BA                           |                                 |  |
| F   | OF                                     | RIGINAL SIGNED                 | ,                            | ALIC O O                        |  |
| APPPROVED BY  | TITLE                                  | PAUL F. KAUTZ                  | UFFR                         | DATE 2 6 2004                   |  |
| Conditions of approval, if any:   | PE                                     | PAUL F. KAUTZ<br>TROLEUM ENGIN | ¥4. TA                       |                                 |  |
|   |  |                                |                              |                                 |  |