

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, 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
Revised March 25, 1999

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

WELL API NO. 30-025-05334
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 25847

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: Montieth B
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/>		
2. Name of Operator BRECK OPERATING CORP.	8. Well No. 1	
3. Address of Operator P.O. BOX 911, BRECKENRIDGE, TEXAS 76424	9. Pool name or Wildcat Lovington Penn Northeast	
4. Well Location Unit Letter <u>C</u> : <u>660</u> feet from the <u>NORTH</u> line and <u>2334</u> feet from the <u>WEST</u> line Section <u>19</u> Township <u>16S</u> Range <u>37E</u> NMPM LEA County		
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		

11. 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 type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>

12. 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 recompilation.

NMOCD Representative on location for plugging:

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.

Plugged well as follow:

1. Set CIBP @ 11250'. Cap with 35' cement.
2. Perf @ 9375'. Unable to squeeze. Spot 35 sx plug. WOC & tag @ 8950'.
3. Perf @ 6375' squeeze with 45 sx to 800#. WOC. Unable to tag plug. Pump 35 sx plug @ 6375'. WOC. Tag plug @ 6339'. Pump 25 sx plug @ 6339'. WOC. Tag plug @ 6239'.
4. Perf @ 5090'. Unable to squeeze, pump 45 sx plug. WOC. Tag plug @ 4905'.
5. Pump 25 sx plug @ 3030'.
6. Pump 25 sx plug @ 2175'. WOC tag plug @ 1875'.
7. Pump 25 sx plug @ 380'. WOC. Tag plug @ 250'.
8. Pump 10' Surface plug.
9. Cut off & install dryhole marker.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Donald Craig TITLE DISTRICT ENGINEER DATE September 8, 2004

Type or print name DONALD R. CRAIG Email address: dcraig@breckop.com Telephone No. (254) 559-3355

(This space for State use)

APPROVED BY Gayle W. Wink TITLE OC FIELD REPRESENTATIVE II / STAFF MANAGER DATE SEP 22 2004

Conditions of approval, if any: