

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

Form C-103
Revised May 08, 2003

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

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| 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. 30-025-36826 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other | | 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 2. Name of Operator LANEXCO, INC. | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator 1105 WEST KANSAS, JAL, NM 88252 | | 7. Lease Name or Unit Agreement Name ROBERT |
| 4. Well Location Unit Letter L 1650 feet from the SOUTH line and 660 feet from the WEST line Section 21 Township 21S Range 37E NMPM County LEA | | 8. Well Number 2 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3487 GR | | 9. OGRID Number 013046 |
| | | 10. Pool name or Wildcat HARE SAN ANDRES |

| | |
|---|--|
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | |
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/> | SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input checked="" 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.

9-10-04 TD - 4250. TOH with bit. Log. TIH with bit. Circ. hole. Lay down D.P. Run 100 jts. 5½ 15.50# LT & C.- 4262 ft. Cement with 720 sx. Bump plug at 5:10 AM.

9-11-04 With 1700 PSI. float held. Circulated 96 sx cmt. to pit. Release rig 10 AM 9-11-04.

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

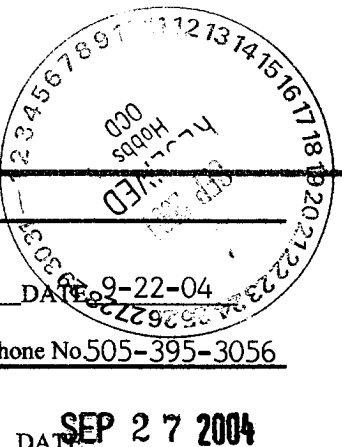
SIGNATURE Mike Copeland TITLE PRODUCTION SUPT.

Type or print name MIKE COPELAND

Telephone No. 505-395-3056

(This space for State use)

APPROVED BY Larry W. Wink FIELD REPRESENTATIVE II / STAFF MANAGER
Conditions of approval, if any



SEP 27 2004