

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
May 27, 2004

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

WELL API NO. 30-025-22943
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. SWD 818
7. Lease Name or Unit Agreement Name ROYALTY HOLDING
8. Well Number 4
9. OGRID Number 213124
10. Pool name or Wildcat SAN ANDRES

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.)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other INJECTION WELL
2. Name of Operator VISTA SERVICES
3. Address of Operator P.O. BOX 758 EUNICE, NM 88231
4. Well Location Unit Letter A 660 feet from the NORTH line and 660 feet from the EAST line Section 25 Township 21S Range 37E NMPM LEA County NM
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11 FT RKB

Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type _____ 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:

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 checked="" type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>
OTHER: <input type="checkbox"/>	

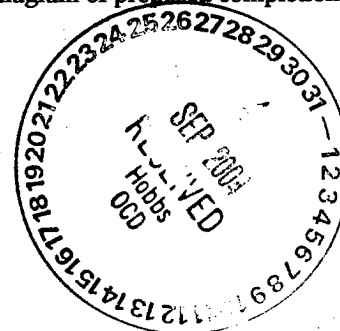
SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
CASING/CEMENT JOB <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.

See Attached :

Would like to start after review and approval.



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 OCD-approved plan ☐.

SIGNATURE Mike P. [Signature] TITLE Vice President DATE Aug-18, 2004

Type or print name _____ E-mail address: _____ Telephone No. _____
For State Use Only
APPROVED BY: Gary W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE OCT 12 2004
Conditions of Approval (if any) _____

August 18, 2004

Subject: Royalty Holding # 4

API #: 3002522943

TS 21.0S R:37 E Sec 25 Unit A

Operator: Mike Pilcher DBA Vista Services

Procedure for well:

- 1) Take 2 3/8 PC Tub. to well
- 2) Rig up on well with pulling unit and reverse unit
- 3) Check for fill
- 4) Clean fill wash over packer
- 5) Retrieve packer
- 6) Run 4 1/2 casing to 4350 ft cement to surface
- 7) Run bond log
- 8) Run PC Tub set packer at 4280 ft
- 9) Pump 1500 gal of 15 % acid and get injection rate.
- 10) Move disposal equipment in.

- 11) Put back on line.

Replace sign on Location with well information.