Submit 3 Copies To Appropriate District Office <u>District 1</u>	State of New Mexico Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		Form C-103 Revised May 08, 2003
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505			WELL API NO. 30-025-36826 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.
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 Gas Well X Other			7. Lease Name or Unit Agreement Name ROBERT 8. Well Number 2
2. Name of Operator LANEXCO, INC.			9. OGRID Number 013046
3. Address of Operator 1105 WEST KANSAS, JAL, NM 88252		IM 88252	10. Pool name or Wildcat HARE SAN ANDRES (GAS)
4. Well Location			
Unit Letter_ L : 1650 feet from the SOUTH line and 660 feet from the EAST line			
Section 21 Township 21S Range 37E NMPM County LEA			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3487 GR			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	SEQUENT REPORT OF: K ☐ ALTERING CASING ☐
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	LLING OPNS. 72 PLUG AND 2
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AN	ABANDONMENTO
OTHER:		OTHER: COMP	
of starting any proposed wor or recompletion. 10-07-04 - Rig v 10-08-04 - Log v 12,18 10-11-04 - Acidi Swab 10-12-04 - Swab 10-13-04 - 150# Run F	the SEE RULE 1103. For Multi up unit. vell and perforate 3,22,27. Run pack Eze with 10,000 ga - Recover 53 bbls 132 bbls. Oil cu	3980,83,84 er to 3886. llons 15% I . Oil cut t 1 -2%. F 170# Tubin	ron Acid and 20 Balls. 1 - 2%.
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE // (A)	TITLE_	PRODUCTION	SUPT. DATE 11-1-04
Type or print name MIKE COPE	CLAND		Telephone No. 505-395-3056
(This space for State use)		PETROLEUM	ENGI NEER
APPPROVED BY Conditions of approval, if any:	TITLE_	FILIOTEON	DATE