

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. 30-025-25528
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Yuronka Cooper
8. Well Number 1
9. OGRID Number 6473
10. Pool name or Wildcat Langlie Mattix - 7R-GB

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other
2. Name of Operator Doyle Hartman
3. Address of Operator 500 N. Main, Midland, Texas 79701
4. Well Location Unit Letter N : 660 feet from the South line and 1980 feet from the West line Section 8 Township 24S Range 37E NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3297' RKB

Pit or Below-grade Tank Application ☐ or Closure ☐

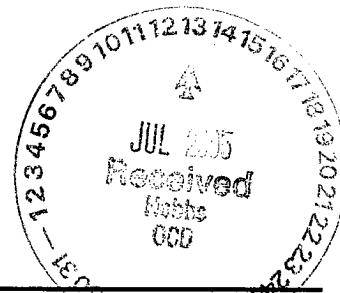
Pit type None Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water  
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material

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 type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: Casing Integrity Test <input checked="" 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"/>
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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.

We plan to perform a casing integrity test on the subject well, and if necessary we will repair the casing. After testing casing and making any repairs (if needed), it is our intention to temporarily abandon subject well pending further evaluation. We will start the work when approved.



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 OGD-approved plan ☐.

SIGNATURE Don Mashburn TITLE Engineer DATE 07-12-05

Type or print name Don Mashburn E-mail address: dhoo-ll@swbell.net Telephone No. (432) 684-4011

For State Use Only

APPROVED BY: Larry W. Wink DATE JUL 14 2005  
Conditions of Approval (if any): SEE FIELD REPRESENTATIVE IN STAFF MANAGER