

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. 30-025-07943
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. 300385
7. Lease Name or Unit Agreement Name East Hobbs San Andres Unit
8. Well Number 715
9. OGRID Number 220420
10. Pool name or Wildcat E. Hobbs (San Andres)
11. Elevation (Show whether DR, RKB, RT, GR, etc.)
Pit or Below-grade Tank Application ☐ or Closure ☐
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 _____

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 ☒ Other **Injection**

2. Name of Operator
Arcena Resources, Inc

3. Address of Operator
4920 S Lewis, Suite 107 Tulsa OK 74105

4. Well Location
Unit Letter **N** : **660** feet from the **South** line and **2103** feet from the **West** line
Section **29** Township **18S** Range **39E** NMPM **LC9** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

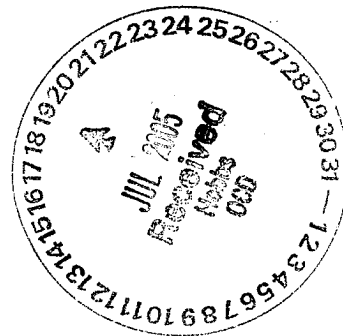
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	P AND A ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
OTHER: ☐		OTHER: Injection well ☒	

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.

6-25-05 680 BPD at 820 PSI

7-2-05 655 BPD at 810 PSI

7-8-05 635 BPD at 795 PSI



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 Danny m Palmer TITLE Production Foreman DATE 7-11-05

Type or print name Danny m Palmer E-mail address: _____ Telephone No. 505-392-2958
For State Use Only

APPROVED BY: Chris Williams TITLE Dist. Supervisor DATE 7/19/2005
Conditions of Approval (if any): _____