Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	October 13, 2009
1625 N French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		WELL API NO. 30-025-28166
811 S. First St. Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 HOBBS OCD 1000 Rio Brazos Rd , Aztec, NM 87410		STATE FEE
District IV - (505) 476-3460 1220 S St Francis Dr , Santa FLIM 5 201	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505 SUNDRY NOTICES	AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS.)	TO DRILL OR TO DEEPEN OR PLUG BACK TO A ON FOR PERMIT" (FORM C-101) FOR SUCH	Cooper
	Well Other	8. Well Number 001
2. Name of Operator	/	9. OGRID Number
MAS OPERATING COMPANY		267077 10. Pool name or Wildcat
3. Address of Operator PO BOX 923 KERMIT, TX 79745		Knowles/ Devonian
4. Well Location		
Unit LetterC:	338feet from theN line and	1784feet from theWline
Section 2 Township 17S Range 38E NMPM Lea 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		
DOWNHOLE COMMINGLE		,
OTHER:	☐ OTHER: Pulled a	nd lowered submersible Pump
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recomp	etion.	
July 2, 2011		
Set 1000 bbl/day pump at 10648 with 2 7/8" tubing		
	,	
F		
Spud Date:	Rig Release Date:	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
R DNI	/	
SIGNATURE Jan Thy A	TITLEManager_	DATEJuly 14, 2011
Type or print name Brantley Heiser	E-mail address: hwheiser@shc	global.net PHONE: 432-618-0678
APPROVED BY: TITLE STATE MAZ DATE 18-2011		
APPROVED BY: Conditions of Approval (if any):	TILE OFFITTING	DATE
Conditions of Asppioral (In mily).		DATE - 18-2011