

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
HOBBS OCD
RECEIVED
APR 18 2012

WELL API NO. 30-025-06183
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 015823
7. Lease Name or Unit Agreement Name Eunice Monument Unit
8. Well Number 11
9. OGRID Number 003044
10. Pool name or Wildcat Eunice Monument; Grayburg-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 <input type="checkbox"/>	
2. Name of Operator Burgundy Oil & Gas of New Mexico, Inc.	
3. Address of Operator 401 W. Texas Ave., Suite 1003; Midland, TX 79701	
4. Well Location Unit Letter <u>E</u> : <u>2310</u> feet from the <u>South</u> line and <u>330</u> feet from the <u>West</u> line Section <u>19</u> Township <u>20S</u> Range <u>37E</u> NMPM <u>15a</u> County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3544' DR	
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 ☐ PLUG AND ABANDON ☒
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☒
CASING/CEMENT JOB ☐

OTHER: ☐

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.

1. 3/16/12 Set 7" CIBP @ 3500'. Cap of w/ 25sx class C cmt.
2. 3/16/12 Spot 35sx @ 2500'. Calculated TOC @ 2297'.
3. 3/19/12 Spot 35sx @ 1200'. Tagged low @ 1123'.
3. 3/20/12 Spot 25sx @ 1123'. Tagged @ 935'.
4. 3/21/12 Sqz. 110sx on Perf. 185' up to Surf.

Plug # 3 (Call OCD talk to Mark W. Could not Est Inj Rate. Press up to 1100 PSI. Ok to drop 50' below Perf's & spot 35sx cmt @ Tag 1123').

Plug # 3 (Call OCD talk to Mark W. Tag cmt low @ 1123'. Ok to spot 25sx cmt & Tag @ 935'. Ok w/ Mark W.)

Approved for plugging of well bore only.
Liability under bond is retained pending receipt
of C-103 (Subsequent Report of Well Plugging)
which may be found at OCD Web Page under
Forms, www.cmnr.state.nm.us/oed.

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 [Signature] TITLE Gen. Mgr. DATE 4/8/12

Type or print name
For State Use Only

E-mail address:

Telephone No.

APPROVED BY: [Signature] TITLE STAFF DATE 4-19-2012
Conditions of Approval (if any):

APR 19 2012