

Submit 1 Copy To Appropriate District  
Office  
District I - (575) 393-6161  
1625 N French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

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 August 1, 2011

WELL API NO.	30-025-07917
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 SOUTH CARTER SAN ANDRES UNIT	
8. Well Number	102
9. OGRID Number	009338
10. Pool name or Wildcat	SOUTH CARTER SAN ANDRES
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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  
GREAT WESTERN DRILLING COMPANY  
3. Address of Operator  
P.O. BOX 1659  
MIDLAND, TX 79702  
4. Well Location  
Unit Letter N : 330 feet from the SOUTH line and 2310 feet from the WEST line  
Section 5 Township 18S Range 39E NMPM County LEA

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:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:  
REMEDIAL WORK ☐ ALTERING CASING ☐  
COMPLETION ☐ CEMENT JOB ☐  
OTHER: ☐  
**Per Underground Injection Control Program Manual  
11.6 C Packer shall be set within or less than 100  
feet of the uppermost injection perfs or open hole.**

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 recompletion.

RE-SET THE PACKER AND PRESSURE TEST TUBING X CASING ANNULUS TO 300 PSI.

**The Oil Conservation Division  
MUST BE NOTIFIED 24 Hours  
Prior to the beginning of operations**

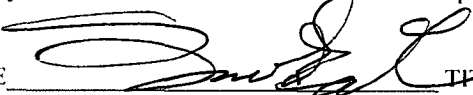
**Condition of Approval: notify  
OCD Hobbs office 24 hours  
prior of running MIT Test & Chart**

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE



TITLE AREA ENGINEER

DATE 05/22/2012

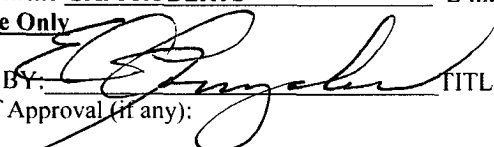
Type or print name SAM ROBERTS

E-mail address: sroberts@gwdc.com

PHONE: (432)682-5241

For State Use Only

APPROVED BY:



TITLE STAFF MEMBER

DATE 5-24-2012

Conditions of Approval (if any):