

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. 30-025-36526
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. VA-1904
7. Lease Name or Unit Agreement Name Willie State Unit
8. Well Number 2
9. OGRID Number 025575
10. Pool name or Wildcat Four Lakes Mississippian (Gas)

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4147' GR

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 _____

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 & A ☐
CASING/CEMENT JOB ☐

OTHER: Intermediate Casing ☒

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.

5-4-05 TD 12-1/4" hole @ 4310'. Set 9-5/8" 36# and 40# casing @ 4310'. Cemented w/1635 sx Premium Plus Light w/additives and tailed in w/200 sx. Circulated to surface. WOC. Tested casing to 1500#. WOC 39 hrs, 5 min. Reduced hole to 8-3/4" resumed drilling.

I hereby certify that the information above is true and complete to the best of my knowledge and belief and 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 Stormi Davis TITLE Regulatory Compliance Technician DATE 5-10-05

Type or print name Stormi Davis E-mail address: stormid@ypcnm.com Telephone No. 505-748-1471

For State Use Only

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE MAY 13 2005
Conditions of Approval (if any):