| Subtitit 3 Copies To Appropriate District Office | State of New Mexico | | | Form C-103 | | |
|--|---|---------------------------------|----------------------|--|---|---------------------------------|
| District I | Energy, Minerals and Natural Resources | | | May 27, 2004 | | |
| 1625 N. French Dr., Hobbs, NM 88240 District 11 | OH CONCERNATION BUTTONS | | | WELL API NO. 30-025-37074 | | |
| 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | | 5. Indicate Type of Lease | | |
| <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | | STATE 🛛 FEE 🗌 | | |
| <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM | Santa Fe, NM 87505 | | | 6. State Oil & Gas Lease No. | | |
| 87505 | | | | VB-623 | | |
| 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.) | | | | 7. Lease Name or Unit Agreement Name Perch State | | |
| 1. Type of Well: Oil Well Gas Well Other | | | | 8. Well Numb | er 2 | |
| 2. Name of Operator | | | | 9. OGRID Number | | |
| 3. Address of Operator | ergy Corporation | | | TO Deal | 013837 | <u>'</u> |
| • | , 060 Artegia NIM 99211 | 0060 | | I 0. Pool name | | |
| P. O. Box 960 Artesia, NM 88211-0960 4. Well Location | | | | Grayburg Jackson SR Q G SA | | |
| Unit Letter A | feet from the | North | line and | 990 feet | from theE | ast line |
| Section 30 | Township | l6S Ran | | NMPM | County | Lea |
| | I 1. Elevation (Show who | ether DR, I | RKB, RT, GR, etc.) | | | |
| Pit or Polon grade T. I. A. I. | | 4359' (| GR | | | |
| Pit or Below-grade Tank Application | | | | | | |
| Pit type Depth Groundw | | | ter well Dist | | | |
| Pit Liner Thickness: mil | | | | struction Materia | | |
| 12. Check A | Appropriate Box to Inc | dicate Na | ture of Notice, | Report or Oth | er Data | |
| NOTICE OF IN | ITENTION TO: | 1 | SUB | SEQUENT R | EPORT OF | • |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | | REMEDIAL WORL | | | CASING 🗍 |
| TEMPORARILY ABANDON |] CHANGE PLANS | | COMMENCE DRI | LLING OPNS. | P AND A | |
| PULL OR ALTER CASING \Box | MULTIPLE COMPL | | CASING/CEMENT | г Јов 🔲 | | |
| OTHER: | | \neg | OTHER: Complete | tion | • | 🛛 |
| 13. Describe proposed or comp of starting any proposed w or recompletion. | oleted operations. (Clearly ork). SEE RULE 1103. Fo | state all pe | rtinent details, and | give pertinent d | ates, including gram of propos | estimated date |
| 03/22/2005 Perforated from 4120 03/25/2005 Frac w/30,500# 16/30 03/26/2005 Perforated from 3704 03/28/2005 Frac w/29,545# 16/30 03/30/2005 RIH w/133 joints 2 3/ | 0 sand, 30,500 gals 40# li -3723', set RBP @ 3855. 0 sand, 30,500 gals 40# li | inear gel. Acidized inear gel. | w/1500 gals 15% | NEFE. | 0 8 10 11 12 12 12 12 12 12 12 12 12 12 12 12 | 13 14 15 16 |
| | e e e e e e e e e e e e e e e e e e e | | | 600 | | 18192021222 |
| | 1 | | | • | 7665 D | 750°56 |
| | | | | | 0026 | 30- |
| | • | | | | | |
| I hereby certify that the information a grade tank has been/will be constructed or | above is true and complete closed according to NMOCD | to the best o | of my knowledge a | nd belief. I furtho or an (attached) alt | er certify that an ernative OCD-app | y pit or below- roved plan [|
| SIGNATURE Jeny W | | ritle Proc | luction Clerk | | DATE_5/20 | 0/2005 |
| Type or print name Jerry W. Sherre For State Use Only | <u>E-</u> | mail addres | s: jerrys@macken | ergycorp.com | - | (505)748-1288 MAY 9 |
| APPROVED BY: Conditions of Approval (if any): | | TITLE PET | ROLĒUM ENG | INÉER | DATE | MAY 2 4 2005 |