

Submit 3 Copies to Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Avenue, Artesia, NM 87210

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

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-103

Revised March 25, 1999

WELL API NO.

30-025-02459

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

LC-066126-C

7. Lease Name or Unit Agreement Name:

Cruces Federal #3

8. Well No.

3

9. Pool name or Wildcat

Lynch Yates Seven Rivers

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

Burk Royalty Co., LTD.

3. Address of Operator

P. O. Box 94903, Wichita Falls, TX 76309

4. Well Location

Unit Letter _____: 330 feet from the South line and 1655 feet from the West line

Section 26

Township 20S Range 34E

NMPM Lea

County

New Mexico

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

11. 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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

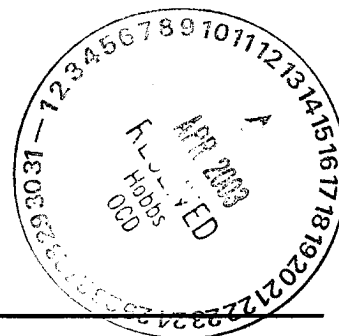
OTHER: ☐

12. 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 recompilation.

Performed mechanical integrity test after well service on injection well.

Initial Pressure 400#

30 Minute Pressure 375#



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

SIGNATURE Charles Gibson TITLE Petroleum Engineer DATE 4-10-03

Type or print name Charles Gibson

Telephone No. 940/397-8600

(This space for State use)

APPROVED BY _____

ORIGINAL SIGNED BY

GARY W. WINK

OC FIELD REPRESENTATIVE II / STAFF MANAGER

DATE APR 21 2003

Conditions of approval, if any:

