| xSubmit 3 Copies To Appropriate District Office State of | State of New Mexico | | Form C-103 | |
|---|--|--|--|-------------------------------|
| <u>District I</u> Energy, Minerals | Energy, Minerals and Natural Resources | | Revised March 25, 1999 | |
| 1625 N. French Dr., Hobbs, NM 88240 District II | | | WELL API NO. 30-041-10147 | |
| 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION | | | 5. Indicate Type | of Lease |
| District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410 | | STATE FEE X | | |
| District IV 2040 South Pacheco, Santa Fe, NM 87505 Santa Fe, NM 87505 | | /505 | 6. State Oil & G | as Lease No. |
| F | V WELL C | | | |
| 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: | | | MILNESAND UI | r Unit Agreement Name: NIT |
| Oil Well Gas Well Other INJECTION | | | | |
| Name of Operator J. CLEO THOMPSON | | | 8. Well No. | 24 |
| 3. Address of Operator 325 N. ST. PAUL, SUITE 4300, DALLAS, TX 75201 | | | 9. Pool name or Wildcat MILNESAND (SAN ANDRES) | |
| 323 N. ST. FAUL, SUITE 4500, DALLAS, TA 73201 | | | MILNESAND (SAN ANDRES) | |
| 4. Well Location | | | | |
| Unit LetterJ_: 1980feet from the SOUTH line and _1980feet from the _EAST line | | | | |
| Section 19 Township 8S | Ra | ange 35E | NMPM | County R00SEVELT |
| 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4219' GL | | | | |
| | | | | |
| 11. Check Appropriate Box to Inc | dicate Na | | | |
| NOTICE OF INTENTION TO: | . — | 1 | SEQUENT RE | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON | · | REMEDIAL WORK | | ALTERING CASING |
| TEMPORARILY ABANDON | | COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT | | |
| PULL OR ALTER CASING | | CASING TEST AN CEMENT JOB | ID 🗆 | |
| OTHER: | | OTHER: MIT I | FOR OCD | Ø |
| 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. 1.) RU BASIC WELL SERVICE. LINE PIT. | | | | |
| 2.) RELEASED PACKER, PULLED 10' & PACKER HUNG UP. PUSHED PACKER TO BOTTOM AND GOT OFF SAFETY JOINT. POOH, TESTED TBG IN HOLE WITH 2 1/16X2 7/8 ARROWSET PACKER. 3.) PACKER SET @ 4423', CIRCULATE PACKER. | | | | |
| 4.) PERFORMED MIT FOR OCD. | | | | 52527 20 20 30 37 |
| | | | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | [COO] |
| I hereby certify that the information above is true and compl | ete to the l | best of my knowledg | ge and belief. $\stackrel{\sim}{N}$ | ED 6 |
| SIGNATURE John Klughes | TITLE | PRODUCTION | 100 | ATE 64/22/03 |
| Type or print name JOHN DUGHES | | Tele | phone No. (432)6 | 34-8403 OCD SO |
| (This space for State use) OC FIELD REPRESENTATIVE II/STAFF MANAGER (C) | | | | |
| APPPROVED BY Lay W. Wink | TITLE | | | DATE PR 2 9 2003 |
| Conditions of approval, if any: | _ | | | |

