

Submit 3 Copies To Appropriate District Office

District I
1625 N. French Dr., Hobbs, NM 87240

District II
811 South First, Artesia, NM 87210

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

WELL API NO.	30-025-28726
5. Indicate Type of Lease	<u>Federal</u>
STATE <input type="checkbox"/>	FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	
8. Well No.	1
9. Pool name or Wildcat	EAST MASON, MASON DELAWARE
10. 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 ☐

2. Name of Operator
QUAY VALLEY, INC.

3. Address of Operator
P. O. BOX 10280
MIDLAND, TEXAS 79702

4. Well Location

Unit Letter J 2004 feet from the EAST line and 2004 feet from the SOUTH line

Section 8 Township 26S Range 32E NMPM County

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 ☐

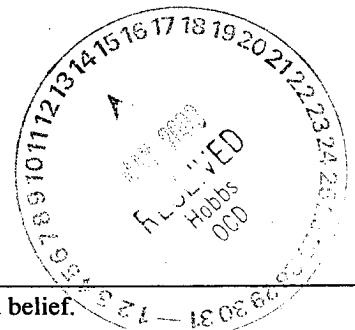
CASING TEST AND CEMENT JOBS ☐

OTHER: ☐

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.

STARTED 05-06-2003

REPAIR CASING LEAK
RAN 4-1/2" FLUSH JT. CASING LINER FROM SURFACE TO 4352'
CIRC. 200 SKS. CI (C) CEMENT
DRILL OUT CEMENT
WELL BACK ON PRODUCTION



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

SIGNATURE Nancy Getz TITLE PROD. TECH. DATE 05/07/2003

Type or print name NANCY GETZ

Telephone No. (432)687-4220

(This space for State use)

APPROVED BY Gary W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER

Conditions of approval, if any:

DATE MAY 15 2003