

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
Revised May 08, 2003

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-00048
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name MOORE (DEVONIAN) COOP SWD SYSTEM
8. Well Number 3
9. OGRID Number 019111
10. Pool name or Wildcat DEVONIAN - SWD

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 ☐ Salt Water Disposal Well

2. Name of Operator
RHOMBUS OPERATING CO., LTD.

3. Address of Operator
P.O. BOX 8316, MIDLAND, TX 79708-8316

4. Well Location

Unit Letter I ; 1980 feet from the SOUTH line and 660 feet from the EAST line

Section 14 Township 11-S Range 32-E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4363'

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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐

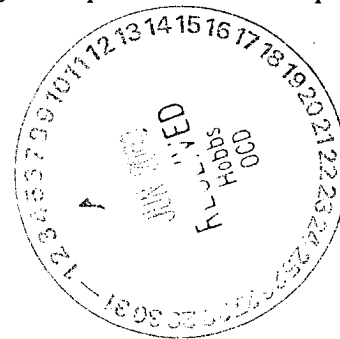
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

Repaired tubing leak (hole in collar of jt #242). Set packer at 10,376'. Pumped pkr fluid. Pres up csg to 560 psi and ran chart. Re-pres two times due to air in system. Last 30 min on chart pres decreased from 500 psi to 490 psi. RD.



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

SIGNATURE Mabry Kniffen-Wingo

TITLE MANAGER

DATE 05/27/03

Type or print name MABRY KNIFFEN-WINGO

Telephone No. 432-683-8873

(This space for State use)

APPROVED BY

Hayward Wink

OC FIELD REPRESENTATIVE II/STAFF MANAGER
TITLE _____ DATE _____

JUN 05 2003

