

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-28652
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No. LG 3732
Lease Name or Unit Agreement Name State 15
Well No. 2
Pool name or Wildcat Eumont Yates 7 RVRS-Queens(oil)

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.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
Name of Operator Ralph C. Bruton	
Address of Operator 3500 Acoma Hobbs New Mexico 88240	
Well Location Unit Letter <u>J</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>East</u> Line 15 Section 19-S Township 36-E Range NMPM Lea County	
Elevation (Show whether DF, RKB, RT, GR, etc.)	

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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 ☐
OTHER: ☐

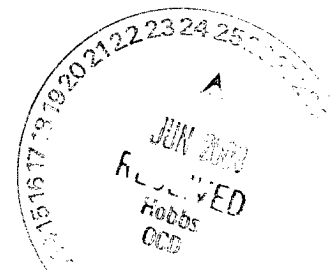
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☒
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

¹²Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

6-16-03 Tag Existing CIBP @ 4150'. Pump Mud laden Fluid. Spot 25 sx Class C 4150'-3903' O.K. Gary Wink NMOCD to skip Tagging this plug. Spot 25sx Class C 2816'-2569'. Spot 25 sx Class C 1600'-1353' WOC.
6-17-03 TIH Tag plug @ 1376'. Spot 15 sx Class C 64'-Surface.
Cut off Cap & Install dry hole marker.

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.



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

SIGNATURE Ralph C. Bruton TITLE OPERATOR DATE 6-19-03

TYPE OR PRINT NAME RALPH C. BRUTON

TELEPHONE NO. 505-292-0266

(This space for State Use)

APPROVED BY Gary W. Wink

OC FIELD REPRESENTATIVE II/STAFF MANAGER 505-292-0266 JUN 25 2003

CONDITIONS OF APPROVAL, IF ANY: