

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
 May 27, 2004

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

WELL API NO. 30-025-06204
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 Eunice Monument Unit
8. Well Number 10
9. OGRID Number 003044
10. Pool name or Wildcat Eunice Monument; Grayburg-San Andres

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
Burgundy Oil & Gas of New Mexico, Inc.

3. Address of Operator
401 W. Texas, Suite 1003 Midland, TX 79701

4. Well Location
 Unit Letter C : 330 feet from the North line and 1650 feet from the West line
 Section 21 Township 20 South Range 37 East NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3521' GR

Pit or Below-grade Tank Application or Closure

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

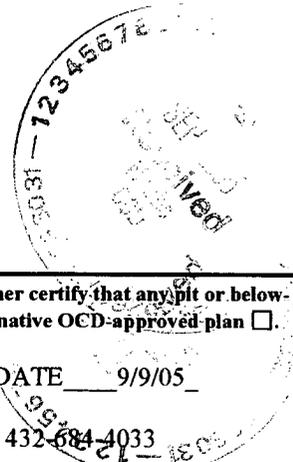
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: Run OCD MIT <input checked="" type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: TA <input type="checkbox"/>	
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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.

- 1) RU Parker & Parker Pump Service
- 2) Run OCD MIT to 500# for 30" - witnessed by J. Brett Parker - 8/29/05

This Approval of Temporary Abandonment Expires 8/29/10



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

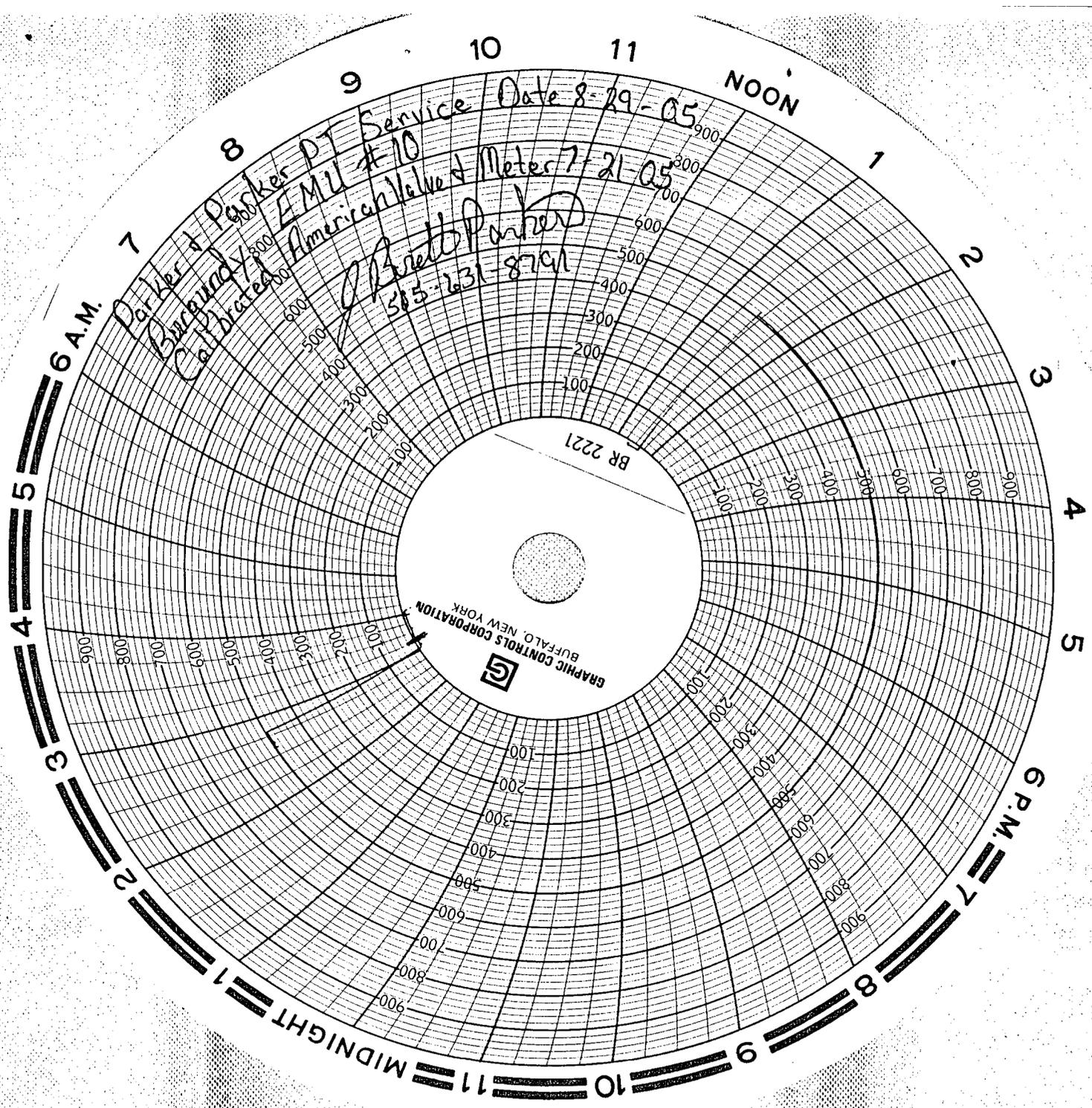
SIGNATURE Cindy K. Campbell TITLE Production Accountant DATE 9/9/05

Type or print name Cindy K. Campbell E-mail address: _____ Telephone No. 432-684-4033

APPROVED BY: Hayward Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE _____

Conditions of Approval (if any): _____

SEP 15 2005



D. Parker & Pasker PT Service Date 8-29-05
Burghard EMU #10
Calibrated American Valve & Meter 7-21-05
D. Parker
505-231-8791

BR 2221
GRAPHIC CONTROLS CORPORATION
BUFFALO NEW YORK