

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

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| WELL API NO. 30-025-23449 |
| 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 Langlie Mattix Queen Unit |
| 8. Well Number 14 |
| 9. OGRID Number 012444 |
| 10. Pool name or Wildcat Langlie Mattix (Queen) |

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| 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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other injection <input type="checkbox"/> | |
| 2. Name of Operator Kelton Operating Corporation | |
| 3. Address of Operator 202 North Main Street, Andrews, Texas 79714-6503 | |
| 4. Well Location Unit Letter <u>D</u> : <u>870</u> feet from the <u>North</u> line and <u>1,270</u> feet from the <u>West</u> line Section <u>14</u> Township <u>25-S</u> Range <u>37-E</u> NMPM County <u>Lea</u> | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,114 GR | |
| Pit or Below-grade Tank Application <input checked="" type="checkbox"/> or Closure <input type="checkbox"/> | |
| Pit type <u>STEEL</u> Depth to Groundwater _____ Distance from nearest fresh water well <u>> 1 mile</u> Distance from nearest surface water <u>> 1 mile</u> | |
| Pit Liner Thickness: <u>STEEL</u> mil Below-Grade Tank: Volume <u>180</u> bbls; Construction Material <u>STEEL</u> | |

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

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

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.

8 5/8" csg @ 1,056' w/ 700 sx circ.; 4 1/2" 9.5 & 16# csg @ 3,480' w/ 900 sx, TOC 310' by TS. Perforations 3,120 - 3,416'

- Set CIBP @ 3,080'. Circulate hole w/ mud and pump 25 sx C cmt on CIBP @ 3,080'.
- Pump 25 sx C cmt @ 2,550'. **Base of salt plug**
- Pump 25 sx C cmt @ 1,138'. WOC & TAG **Top of salt plug**
- Squeeze 90 sx C cmt 300 - 200'. **WOC & TAG**
- Circulate 10 sx C cmt 50' to surface. RDMO.
- Cut off wellhead & anchors, installed dry hole marker.

THE OIL CONSERVATION DIVISION MUST
BE NOTIFIED 24 HOURS PRIOR TO THE
BEGINNING OF PLUGGING OPERATIONS.

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 NMOC guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE C. Kelton TITLE President DATE 08/23/05

Type or print name Dale Kelton E-mail address: Kelton@nmocd.com Telephone No. 432-524-6400

For State Use Only

APPROVED BY: Larry W. Wink TITLE _____ DATE SEP 2 2005

Conditions of Approval (if any):