

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 36977
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Jalmat Field Sand Yates Unit
8. Well Number: 212
9. OGRID Number: 184860
10. Pool name or Wildcat Jalmat (T-Y-7R)

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Melrose Operating Co.	
3. Address of Operator c/o P.O. Box 953, Midland, TX 79702	
4. Well Location Unit Letter <u>D</u> : <u>660'</u> feet from the <u>North</u> line and <u>990'</u> feet from the <u>West</u> line Section <u>23</u> Township <u>22S</u> Range <u>35E</u> NMPM County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3580'	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input 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 checked="" 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.

8-31-05: Spudded 12 1/4" hole, drilled to 420'. RU & ran 8 5/8", J-55, 23# casing to 415'. Wait on cementers.
9-1-05: Rigged up cementers to cement 8 5/8". Cemented with 325 sx CI C, 2% CaCl, .125 CF, landed plug, float held. Circulated 4 sx to pit. WOC. Tested to 1000#.
9-6-05: Reached total depth of 4132'. Circulated hole & prep to log.
9-7-05: Logged well. Ran 5 1/2", 15.5#, J-55 casing to 4132', cemented with 500 sx 50/50 pox CI C, 10% gel, 5% salt, .125# CF. Tailed with 250 sx 50/50 pox CI C 2% gel, 5% salt. Plug down, floats held. Circulated 23 sx to pit. WOC.

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

SIGNATURE [Signature] TITLE Regulatory Agent DATE: 9-16-05
Type or print name _____ E-mail address: _____ Telephone No. _____
For State Use Only

APPROVED BY: [Signature] TITLE _____ DATE SEP 26 2005
Conditions of Approval (if any): _____