

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. 30-025-20899
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 39
9. OGRID Number 003044
10. Pool name or Wildcat Eunice Monument; Grayburg-San Andres

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 Burgundy Oil & Gas of New Mexico, Inc.	
3. Address of Operator 401 W. Texas, Suite 1003 Midland, TX 79701	
4. Well Location Unit Letter <u>C</u> : <u>330</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>29</u> Township <u>20 South</u> Range <u>37 East</u> NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3325' 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:

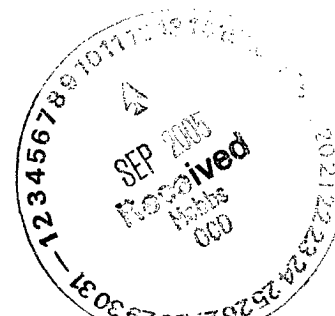
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: Return to Production ☒

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) Tested tubing for integrity
- 2) RU service unit and change out rod pump
- 3) Install electrical equipment
- 4) Put well to pumping 8/16/05
- 5) Well test 8/23/05 – Pump 2 BO x 32 BW x 3 MCF



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 9/8/05

Type or print name Cindy K. Campbell E-mail address: \_\_\_\_\_ Telephone No. 432-684-4033  
**For State Use Only**

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE OCT 07 2005  
Conditions of Approval (if any): \_\_\_\_\_