

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

HOBBS OCD

OIL CONSERVATION DIVISION

JAN 07 2014

1220 South St. Francis Dr.
 Santa Fe, NM 87505

RECEIVED

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.)		WELL API NO. 30-025-28425
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other SWD		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Cameron Oil & Gas, Inc.		6. State Oil & Gas Lease No. SWD 1342
3. Address of Operator P.O. Box 1455, Roswell, NM 88202-1455		7. Lease Name or Unit Agreement Name Gulf State
4. Well Location Unit Letter <u>N</u> : <u>660</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>2</u> Township <u>23S</u> Range <u>37E</u> NMPM Lea County		8. Well Number <u>2 SWD</u> 9. OGRID Number <u>181109</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		10. Pool name or Wildcat San Andres, Glorietta, Yeso, Abo (SWD)

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
 DOWNHOLE COMMINGLE
 CLOSED-LOOP SYSTEM
 OTHER:

SUBSEQUENT REPORT OF:

- REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. P AND A
 CASING/CEMENT JOB
 OTHER: UIC X

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

SEE ATTACHED COPY OF CHART

Requirement for UIC

Spud Date:

Rig Release Date:

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

SIGNATURE David Sweeney TITLE VICE PRESIDENT DATE: JANUARY 6, 2014

Type or print name DAVID SWEENEY E-mail address: dsweeney@cameronoil.com PHONE: (575) 627-3284

For State Use Only

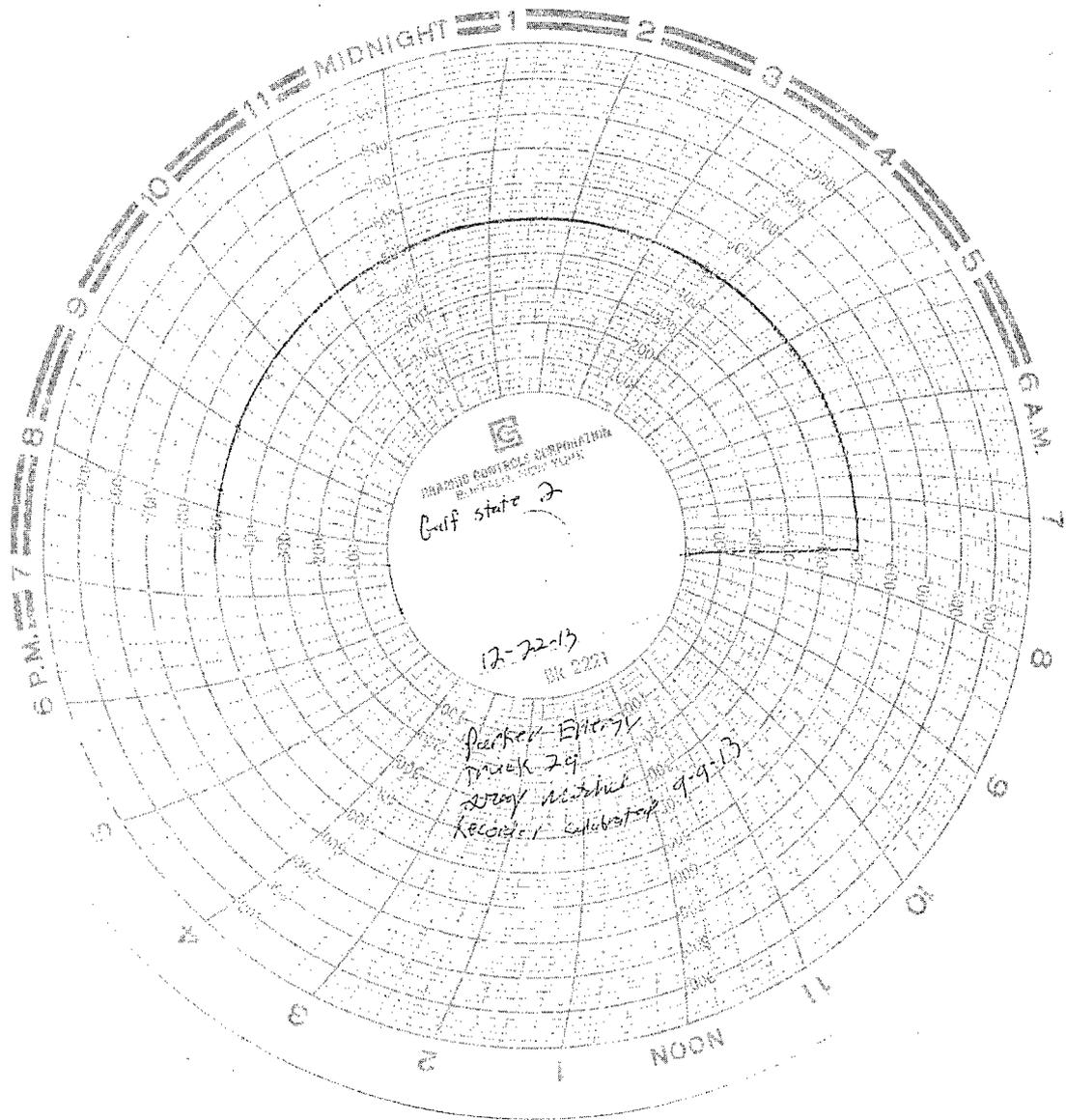
APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

Accepted for Record Only
 MSB - 1/8/2014

JAN 27 2014

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