

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.	30-025-22696
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. OG-1318	
7. Lease Name or Unit Agreement Name CABOT C STATE	
8. Well Number	001
9. OGRID Number	227001
10. Pool name or Wildcat BAGLEY;PERMO PENN, NORTH	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4244' GR	
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:

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

OTHER: ADD PERFS & STIMULATE ☐

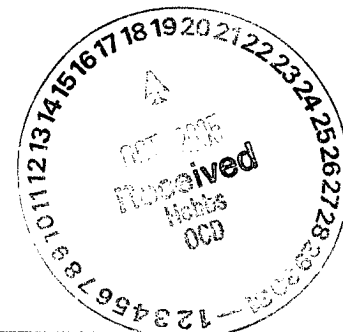
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☐

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. MIRU pulling unit. POH w/tubing.
2. Run spectral GR/compensated neutron log from 9600-8600'.
3. Based on log, selectively perforate the Ranger Lake zone 9325-9450'.
4. If necessary, acidize well with 3000 gal. 15% NEFE.
5. RIH w/tbg, rods & pmp.



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

SIGNATURE Sabra Woody TITLE Engineering Technician DATE 10/17/2005

Type or print name Sabra Woody  
For State Use Only

E-mail address: swoody@latigopetro.com Telephone No. (432)684-4293

APPROVED BY: Harry W. Wink TITLE OG FIELD REPRESENTATIVE II/STAFF MANAGER DATE OCT 27 2005  
Conditions of Approval (if any):