

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  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-09899
5. Indicate Type of Lease STATE <del>X</del> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 25104
7. Lease Name or Unit Agreement Name:  Eumont Hardy Unit
8. Well No. 26
9. Pool name Eumont: Yates Seven Rivers Queen

<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	
2. Name of Operator Mar Oil and Gas Corp.	8. Well No. 26
3. Address of Operator P.O. Box 5155 Santa Fe NM 87502	9. Pool name Eumont: Yates Seven Rivers Queen
4. Well Location  Unit Letter C 660' FNL, 1980 FWL  Section 5 Township 21S Range 37E NMPM County LEA	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,453 GR	

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

NOTICE OF INTENTION TO:

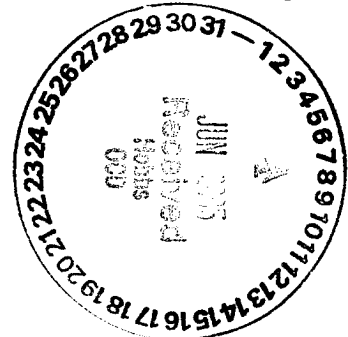
- PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐  
OTHER: Convert well from Oil well to WIW ☒

SUBSEQUENT REPORT OF:

- REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER:

12. 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 recompilation.

The well is an active oil well  
Intent to convert the well to a water injection well, by June 2005



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

SIGNATURE DCW TITLE : VP Operations DATE : June 7, 2005

Type or print name Duane C Winkler Telephone No. 505-989-1977

(This space for State use)

APPROVED BY Hayward Winkler TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE OCT 31 2005  
Conditions of approval, if any