

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. <b>30-025-24003</b>
5. Indicate Type of Lease <i>Federal</i> STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>Curry Federal</b>
8. Well Number <b>2</b>
9. OGRID Number <b>168687</b>
10. Pool name or Wildcat <b>SWD: Delaware</b>

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 ☐ Gas Well ☒ Other *SWD*

2. Name of Operator  
**Siana Operating, LLC**

3. Address of Operator  
**P. O. Box 10303, Midland, TX 79702**

4. Well Location  
Unit Letter **N** : **660** feet from the **South** line and **1830** feet from the **West** line  
Section **22** Township **23-S** Range **34-E** NMPM **Lea** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**3476' GL**

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 well to SWD operations.

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.) **NU wellhead. Called OCD - performed MIT test. Held 300# for 34 mins - good test- Mr. Buddy Hill signed off on chart - Hector DeLeon witnessed test.**

*SWD:588*

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 *Tonya M. Reece* TITLE **Production Clerk** DATE **12/09/05**

Type or print name **TONYA M. REECE**  
For State Use Only

OCD DISTRICT SUPERVISOR/GENERAL MANAGER  
E-mail address:

Telephone No.  
**432-682-2338**

APPROVED BY: *Chris Williams* TITLE **OCD DISTRICT SUPERVISOR/GENERAL MANAGER**  
Conditions of Approval (if any):

DATE **DEC 14 2005**



