

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.

30-025-09213

Indicate Type of Lease

STATE ☒ FEE

State Oil & Gas Lease No.

32447

Lease Name or Unit Agreement Name

Seven Rivers Queen Unit

Well No.

41

Pool name or Wildcat

Seven Rivers Queen

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.)

Type of Well:

OIL
WELL ☐

GAS
WELL ☐

X OTHER Injection

Name of Operator

ARENA RESOURCES INC.

Address of Operator

4920 S. Lewis, Suite 107, Tulsa OK. 74105

Well Location

Unit Letter A : 1660 Feet From The NORTH Line and 660 Feet From The EAST Line

Section 2 Township 23S Range 36E NMPM County LEA.

Elevation (Show whether DF, RKB, RT, GR, etc.)

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ANBANDONME ☒

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

12-6-05 Spotted 355K cement plug @ 3550' WOC + TA9.

12-7-05 Taped plug @ 3440' C&K 5/6.

12-7-05 Spotted 255K plug 3000.-2754.

12-7-05 PERF @ 1350'

12-9-05 Set 255K into PERF. WOC + TA9 Taped 1220

12-9-05 PERF 468 C&K 1155K. TO SURFACE - ^{5 1/2} down + up 8 3/8 TO SURFACE 300' psi closed in

CUT-OFF + dryhole marker

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.

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

SIGNATURE

Bobby Gray

TITLE

PTA Supervisor

TYPE OR PRINT NAME

BOBBY GRAY

(This space for State Use)

APPROVED BY

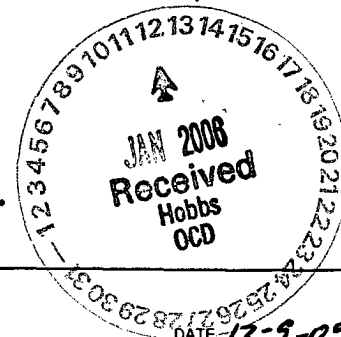
Chris Williams

TITLE

OC DISTRICT SUPERVISOR/GENERAL MANAGER

DATE

CONDITIONS OF APPROVAL, IF ANY:



DATE 12-9-05

432-664-6829

TELEPHONE NO.

JAN 19 2006