

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.
3002509068

5. Indicate Type of Lease

STATE ☒ FEE ☒

6. State Oil & Gas Lease No.
34227

7. Lease Name or Unit Agreement Name

Seven Rivers Queen Unit

8. Well Number 5

9. OGRID Number
220420

10. 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.)

1. Type of Well: Oil Well ☐ Gas Well ☐ Other - Injection

2. Name of Operator
Arena Resources Inc.

3. Address of Operator
4920 S. Lewis, Suite 107, Tulsa, OK 74105

4. Well Location

Unit Letter E : 1980 feet from the North line and 660 feet from the West line
Section 27 Township 22S Range 36E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3503' GR

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: ☐

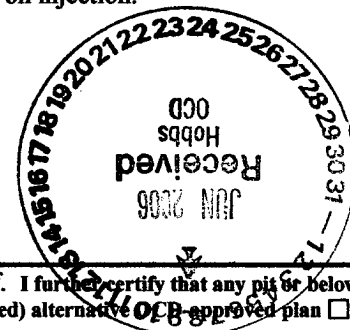
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

5-15-06 MI RU DDU. COOH with packer.

5-16-06 Clean out fill. GIH with packer and RBP. Test casing. Held OK. Completed 5-26-06.

5-25-06 GIH with 3 1/2 cup type packer. 10 jts 2 1/16" tubing, 5 1/2 AD1 Injection packer. Pump packer fluid, set 3 1/2 cup type packer at 3657', 5 1/2 AD1 packer at 3355'. Test casing, run chart. Held OK. RD MO DDU. Well on injection.

Perfs 3692-3758'



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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative approved plan ☐.

SIGNATURE _____ TITLE Production Supervisor DATE 6-7-06

Type or print name Danny M. Palmer
For State Use Only

E-mail address:

Telephone No. (505) 738-1739

APPROVED BY: [Signature] TITLE _____ DATE JUN 09 2006
Conditions of Approval (if any):

OC FIELD REPRESENTATIVE II/STAFF MANAGER

