

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  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.  
30-025-35240

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

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 ☒

2. Name of Operator

Capataz Operating, Inc.

3. Address of Operator

PO Box 10549, Midland, TX 79702

4. Well Location

Unit Letter O : 660 Feet From The South Line and 1800 Feet From The East Line

Section 11 Township 20S Range 38E NMPM Lea County

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

3565 GP

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 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.

MIRU. Drilling Rig. Spud 1630 hrs 07/26/03. Drill 12-1/4" hole to 1637'.

Run 1502' 8-5/8" 24# casing to 1502' and cement w/ 570 SX 35:65 POZ "C" w/ 2% CaCl, .25#/SK Cello Flake, 6% Gel and 300 SX "C" w/ 2% CaCl. Circulated out 80 SX. WOC 18-1/4 hrs. TIH W/ 7-7/8" Bit, drilled out Float Collar, Shoe Joint & Shoe.

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

SIGNATURE

H Scott Davis

TITLE

Agent

DATE

8-01-03

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY

Harry W. Wink

OC FIELD REPRESENTATIVE II/STAFF MANAGER

TITLE

DATE

AUG 05 2003

CONDITIONS OF APPROVAL, IF ANY: