Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Revised March 25, 1999 Energy, Minerals and Natural Resources District I WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 30-025-02405 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 88210 5. Indicate Type of Lease District III 1220 South St. Francis Dr. STATE X **FEE** 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV State Oil & Gas Lease No. 1220 S. St. Francis Dr., Santa Fe, NM 63404-00 87505 7. Lease Name or Unit Agreement Name: 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 Sarah Sue PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other 8. Well No. Name of Operator Louray Oil Co. 9. Pool name or Wildcat Address of Operator Pearl Seven Rivers P.O. Box 2081, Lovington, NM 88260 Well Location line and 660 feet from the E .1980 feet from the North Township 19S **NMPM** County Section 36 Range 34E Chaves. 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3721 GL 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ ALTERING CASING REMEDIAL WORK **CHANGE PLANS** COMMENCE DRILLING OPNS. **TEMPORARILY ABANDON** PLUG AND **ABANDONMENT PULL OR ALTER CASING MULTIPLE CASING TEST AND** COMPLETION **CEMENT JOB** OTHER: OTHER: REQUEST BY OCD 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. 8/29/06 Pulled 138 its. 2 7/8" tbg.out of hole. Waiting on wireline truck to run a cement bond log. I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Agent, For Louis Edgett, Principal DATE 9/26/06 **SIGNATURE** Type or print name Louis Edgett Telephone No. 505-631-3387 (This space for State use) C FIELD REPRESENTATIVE II/STAFF MANAGER APPPROVED BY

Conditions of approval, if any: