

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. 30-015-25920
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. LC-029435-B
7. Lease Name or Unit Agreement Name J. L. KEEL "B"
8. Well Number 39
9. OGRID Number
10. Pool name or Wildcat Grayburg-Jackson

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 ☐ **RECEIVED**

2. Name of Operator
Merit Energy Company **MAR 09 2005**

3. Address of Operator
13727 Noel Road, Ste 500, Dallas, TX 75240 **OCD-ARTESIA**

4. Well Location
Unit Letter M : 510 feet from the South line and 660 feet from the West line
Section 5 Township 17-S Range 31-E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
GL - 3780'

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type steel 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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

02-15-05 SET 5-1/2" CIBP@2825 SET 25 SX CMT ON CIBP TOC @ 2607' (CALCULATED). TESTED CSG TO 500 PSI.
02-16-05 PEFORATE 5-1/2" @ 580'. SQZ 30 SX CMT THROUGH HOLES @ 580'. TAG TOC @ 480'.
02-17-05 SET 45 SC MT PLUG THROUGH TBG FROM 429' - SURFACE. CUT OFF WELLHEAD AND INSTALL DRYHOLE MARKER.

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 Jimmy Taylor TITLE Dist. Mgr. Terra Applied Technologies DATE 2-28-05

Type or print name _____ E-mail address: _____ Telephone No. _____
For State Use Only

APPROVED BY: _____ TITLE _____ DATE AUG 10 2006
Conditions of Approval (if any): _____