

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
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. 30-005-63782
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: ASSAULT
8. Well Number 1
9. OGRID Number 230387
10. Pool name or Wildcat WILCAT, WOLF CAMP GAS 97489

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	2. Name of Operator PARALLEL PETROLEUM CORPORATION
3. Address of Operator 1004 N BIG SPRING, SUITE 400, MIDLAND, TX 79701	4. Well Location Unit Letter <u>D</u> : <u>400</u> feet from the <u>N</u> line and <u>760</u> feet from the <u>2</u> line Section <u>27</u> Township <u>14S</u> Range <u>263</u> NMPM <u>NM</u> County <u>CHAVES</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR: 3424	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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:	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 checked="" type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" 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.

09-07-06: SPUD WELL @ 15:45
09-09-06: RUN 9.625" CSG, 12.25" HOLE, 36# SET @ 1450; LEAD #1: CMT W/600 SX 50/50/10POZ C W/.5% CELLO, 5% GEL, 11.6 PPG, 2.61 YIELD. LEAD #2: CMT W/180 SX CL CH W/10% A10, 10# LCM, 1% CA CL, .25 PPS CELLO. TAIL W/300 SX CL C W/2% CA CL, 14.8 PPG, 1.34 YIELD
CIRCULATE 307 SX TO PIT
WOC: 23 HOURS, TEST CSG TO 1000 PSI FOR 45 MINUTES.

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 Kaye McCormick TITLE SR PROD & REG TECH DATE 09-25-2006
Type or print name KAYE MC CORMICK E-mail address: kmccormick@plll.com Telephone No. 432-685-6563

For State Use Only FOR RECORDS ONLY OCT 02 2006
APPROVED BY _____ TITLE _____ DATE _____
Conditions of Approval, if any: