

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.: 30 025 01137

5. Indicate Type of Lease  
STATE X FEE

6. State Oil & Gas Lease No.  
B 9385

7. Lease Name or Unit Agreement Name  
New Mexico "AN" State

8. Well Number: 2

9. OGRID Number: 213190

10. Pool name or Wildcat  
Saunders Permo Upper Penn

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 X Gas Well Other

2. Name of Operator: CrownQuest Operating, LLC

3. Address of Operator:  
c/o P.O. Box 953, Midland, TX 79702

4. Well Location

Unit Letter J : 1980 feet from the South line and 1980 feet from the East line  
Section 22 Township 14S Range 33E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.): 4215'

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: null 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 X 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: T/A

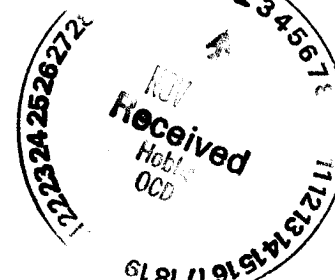
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

T/A procedure:

Rigged up pump truck.

Loaded & tested CIBP to 605 psi for 30 minutes. Good test, Chart attached.

This Approval of Temporary  
Abandonment Expires 10/19/11



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 X, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE TITLE Regulatory Agent DATE 11-1-06

Type or print name Ann E. Ritchie E-mail address: ann.ritchie@wtor.net Telephone No.: 432 684-6381

For State Use Only

APPROVED BY: Gary W. Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER

Conditions of Approval (if any):

DATE NOV 03 2006

