

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

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.)		WELL API NO. 30-025-03962
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator MNA Enterprises Ltd. Co.		6. State Oil & Gas Lease No.
3. Address of Operator 106 West Alabama, Hobbs, New Mexico 88242		7. Lease Name or Unit Agreement Name Catron B State
4. Well Location Unit Letter <u>A</u> : <u>660</u> feet from the <u>North</u> line and <u>660</u> feet from the <u>East</u> line Section <u>11</u> Township <u>18-S</u> Range <u>36-E</u> NMPM County <u>Lea</u>		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4,217' GR		9. OGRID Number 124768
Pit or Below-grade Tank Application <input checked="" type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Arkansas Junction Queen Gas
Pit type <u>steel</u> Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: <u>steel pit</u> mil Below-Grade Tank: Volume _____ bbls; Construction Material <u>steel</u>		

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 checked="" 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.

13 3/4" csg @ 320', circ; 8 3/4" csg @ 1,855' circ; 4 1/2" 10.5# csg @ 5,132', TOC 2,800' est; Queen perfs 4,475 - 4,493'

1. POOH w/ rods & pump.
2. RIH w/ production tubing, tag packer @ 4,544'
3. Pump 25 sx C cmt @ 4,544' WOC & TAG no deeper than 4,375'
4. Circulate hole w/ mud
5. Pump 25 sx C cmt @ 3,185' base of salt plug
6. Cut & pull 4 1/2" casing from ~1,855'
7. Pump 50 sx C cmt @ 1,905' csg stub, csg shoe & top of salt WOC & TAG
8. Pump 35 sx C cmt @ 370'
9. 20 sx C cmt 50' to surface plug - WOC & TAG
10. Cut off wellhead & anchors, install dry hole marker, backfill cellar

JIM - WHERE IS SCHEMATIC?

**THE OIL CONSERVATION DIVISION MUST
BE NOTIFIED 24 HOURS PRIOR TO THE
EXECUTION OF PLUGGING OPERATIONS.**

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 Jim F. Newman TITLE Engineer, Triple N Services, Inc. DATE 03/29/07

Type or print name James F. Newman, P.E. E-mail address: jim@triplenservices.com Telephone No. 432-687-1994
For State Use Only

APPROVED BY: Harry W. Wink FIELD REPRESENTATIVE II / STAFF MANAGER DATE MAR 29 2007
Conditions of Approval (if any):