

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. 30-005-01115
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name WEST CAP QUEEN SAND UNIT
8. Well Number # 18
9. OGRID Number 241214
10. Pool name or Wildcat CAPROCK QUEEN

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 ☐

2. Name of Operator
PALISADES ASSET HOLDING COMPANY, LLC

3. Address of Operator
223 W. WALL STREET STE 825, MIDLAND, TEXAS 79701

4. Well Location
Unit Letter D : 660 feet from the NORTH line and 660 feet from the WEST line
Section 21 Township 14 S Range 31 E NMPM CHAVES County

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

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: _____ 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ 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: : RE-ACTIVATE - INJECTION ☒

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.

RE-ACTIVATED INJECTION WELL

3/23/07 - TESTED TBG-CASING ANNULUS ON WELL: TESTED TO 550# NO LEAKS ; TP = 450# AND DID NOT VARY
4/4/07 - INJECTING AT 450 POUNDS PRESSURE
4/7/07 - INJECTED 247 BW AT 480 POUNDS
4/8/07 - INJECTED 247 BW AT 480 POUNDS
4/9/07 - WELL IS NOW TAKING 285 BWPD AT 480 POUNDS



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

SIGNATURE Herbert F. Boles TITLE MANAGING MEMBER DATE 4/12/07

Type or print name HERBERT F. BOLES
For State Use Only

E-mail address: BUD@CFAW.COM Telephone No. (432) 686-7159

APPROVED BY: Gay W. Wink
Conditions of Approval (if any):

OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE APR 13 2007

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STATE ☐ FEE ☒
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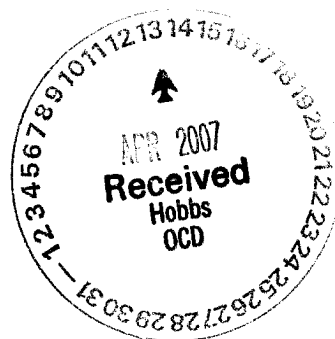
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NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	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 checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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WELL #18 IS NOW TAKING 285 BWPD AT 480 POUNDS



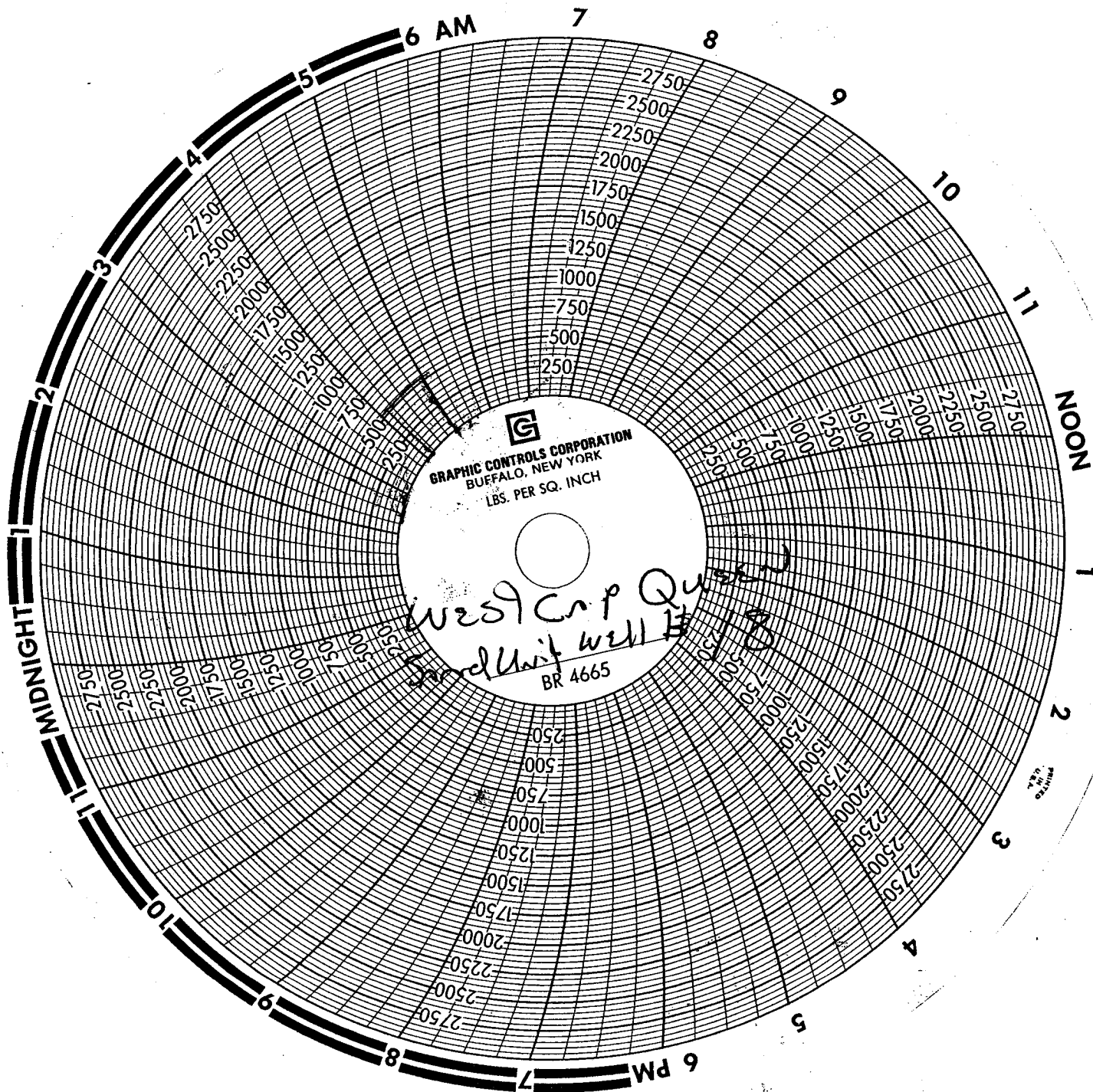
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Type or print name HERBERT F. BOLES E-mail address: BUD@CFAW.COM Telephone No. 432-686-7159

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APPROVED BY: Harry W. Wind TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE APR 13 2007
Conditions of Approval (if any):



Juan A. Rueda

APR 2, 07

STONE OILFIELD SBR