

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. 30-025-23127
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 300982
7. Lease Name or Unit Agreement Name Shell State B Com
8. Well Number 1
9. OGRID Number 230601
10. Pool name or Wildcat Bagley; Permo Penn North

Pit or Below-grade Tank Application ☐ or Closure ☐
Pit type Workover Depth to Groundwater 65 Distance from nearest fresh water well 2640' Distance from nearest surface water None
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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
JM Cox Resources, L.P.

3. Address of Operator
P O Box 2217, Midland, TX 79702

4. Well Location
Unit Letter A : 510 feet from the North line and 660 feet from the East line
Section 5 Township 12S Range 33E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4259 GR

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
MULTIPLE COMPL. <input checked="" type="checkbox"/>	P AND A <input type="checkbox"/>
CASING/CEMENT JOB <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.

MIRU workover unit and POOH rods and tubing

R/U wireline unit and set CIBP @ 9720'

P/U perforating guns and GIH and perforate base of Wolfcamp formation 9430'-9685'.
Rig down wireline.

P/U packer and GIH w/tbg to 9700' and spot 250 gallons 20% NEFE acid across perforations. Raise packer to 9300' and set packer.

Treat well w/3750 gallons 20% NEFE acid.

Swab and test well.



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 Shirley Melam TITLE Manager Production Acctng DATE 7-3-07

Type or print name
For State Use Only

E-mail address:

Telephone No.

APPROVED BY: Chris Williams TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE JUL 06 2007
Conditions of Approval (if any):