

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. 30-005-20728 ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator John R. Stearns dba Stearns		6. State Oil & Gas Lease No.
3. Address of Operator HC 65, Box 988, Crossroads, NM 88114		7. Lease Name or Unit Agreement Name: Booher 35 ✓
4. Well Location Unit Letter D : 467 feet from the FNL line and 467 feet from the FWL line Section 35 Township 7S Range 31E NMPM County Chaves		8. Well No. 1 ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 21566 ✓
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Tom Tom (San Andres)
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

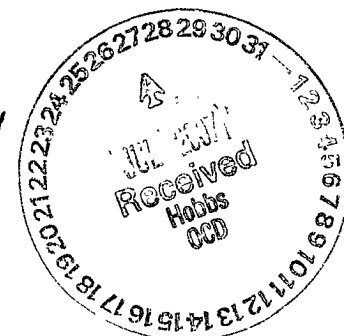
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input checked="" type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

Propose P&A 8 5/8 @ 1650 725 sx. Circulated
4 1/2 @ 4150 250 sx. 3200 TOC

1. CIBP @ 3950. Circulate hole with mud laden fluid. Set 25 sx cmt on top BP.
2. Perf. csg. @ 3150. Set packer @ 2900. Sqz. 40 sx. cmt. WOC & Tag.
3. Perf. csg. @ 1700. Set packer @ 1450. Displace to 1600. WOC & Tag
4. Perf. csg. @ 350. Circulate cement to surface (40 sx)
5. Cut off Wellhead and Install Dry Hole Marker.

**THE OIL CONSERVATION DIVISION MUST
BE NOTIFIED 24 HOURS PRIOR TO THE
BEGINNING 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 Roger D. Brooks TITLE Agnet DATE 7/26/07

Type or print name Roger Brooks
For State Use Only

E-mail address: _____ Telephone No. 432-580-7161

APPROVED BY Hayward Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JUL 31 2007

Conditions of Approval (if any): _____