| Submit 3 copies to Appropriate District Office | State of I | State of New Mexico | | Form C-103 | |
|---|--|--|--|---|--|
| DISTRICT : | Energy, Minerals and Natural Resources | | Revised March 25, 1999 | | |
| 1625 N. French Dr., Hobbs NM 88240 DISTRICT II | OIL CONSERV | WELL API NO. | 20,400 | | |
| 1301 W. Grand Avenue, Artesia NM 88210 DISTRICT III | OIL CONSERV 1220 South | 30-025- 5. Indicate Type of Lea | | | |
| 1000 Rio Brazos Rd., Aztec NM 87410 | | | STATE X | FEE 🗍 | |
| DISTRICT IV | | | 6. State Oil & Gas Lea | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 8750 | | | VA-1 | | |
| | SUNDRY NOTICES AND REPORTS | | 7. Lease Name or Uni | t Agreement Name | |
| (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.) | | | Mandrall | State Unit | |
| 1. Type of Well: Oil Well Gas Well X Other | | | Mandrell | State Utilit | |
| | Other Other | | 8. Well No. | | |
| 2. Name of Operator | ates Petroleum Corporation | | o. vveli ivo. | | |
| 3. Address of Operator | | | 9. Pool Name or Wildo | cat | |
| 105 South 4th Str., Artesia, NM 88210 | | | Wildcat Mississippian | | |
| 4. Well Location | · · · · · · · · · · · · · · · · · · · | The state of the s | | , , , , , , , , , , , , , , , , , , , | |
| Unit Letter D : 990 | 0 feet from the North | line and 990 | feet from the | West line | |
| 04: 10 | Taxanabia 14C Bassa | 255 314534 | | | |
| Section 19 | Township 14S Range D. Elevation (Show whether DF, RKE | 35E NMPM | County | Lea | |
| | 4066' GR | , rvr, Grv, 616.) | | | |
| 11 Check Appropriate F | Box to Indicate Nature of Notice | Report or Other Data | | and the second second | |
| | FINTENTION TO: | | T REPORT OF: | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK | ALTERING CASING | | |
| TEN ONWINEMEDIAL WORK | | Temebrae Work | = | | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLING OPNS. | PLUG AND ABANDONMENT | | |
| PULL OR ALTER CASING | MULTIPLE COMPLETION | CASING TEST AND CEMENT JOB | | | |
| OTHER: | | OTHER: Surfac | ce Casing | X | |
| 12. 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 recompilation. | | | | | |
| | | | | | |
| | | | | | |
| 40.000.00 | 011 1 1 1001 0 110 0101 | | | | |
| 10-9-03 Drilled 17-1/2" hole to 430'. Set 13-3/8" 48# casing @ 430'. Cemented w/250 sx Halliburton | | | | | |
| Premium Plus C w/additives. Tailed in w/200 sx. Cement circulated. WOC. | | | | | |
| $\mathcal{L}_{\alpha}^{\prime}\mathcal{V}$ | | | | | |
| 10-10-03 Reduced hole to 12-1/4" and resumed drilling. | | | | | |
| | | | 27 | 13,490H | |
| | | | [3] | EOD> , ^ 74 | |
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| | | | ` | (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) | |
| | | | | -64 ET 27 1/2 | |
| Thereby certify that the information above a true and complete to the best of my knowledge and belief. | | | | | |
| SIGNATURE | TITLE | Regulatory Compliance Tec | hnician DATE | 10/13/03 | |
| Type or print name Sto | ormi Davis | | Tolonhana Ma | 505-748-1471 | |
| (This space for State use) | ATTIT DAVIS | | Telephone No. | 505-748-1471 | |
| APPROVED BY HOUND TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER OCT 1 6 7893 | | | | | |
| Conditions of approval, if any: | | | | | |
| 11 | V | | | | |

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