

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. 30-025-34911
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E 5840
7. Lease Name or Unit Agreement Name TORO 34 STATE
8. Well Number 1
9. OGRID Number 246289
10. Pool name or Wildcat PEARL SAN ANDRES

4. Well Location Unit Letter <u>F</u> : 1650 feet from the <u>NORTH</u> line and <u>1930</u> feet from the <u>WEST</u> line Section <u>34</u> Township <u>19S</u> Range <u>35E</u> NMPM LEA County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3703 (GR)
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
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: FINAL CLEAN UP ☒

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.

NOTIFICATION OF FINAL CLEAN UP. THIS LOCATION HAS BEEN CLEANED AND LEVELED AND ABANDONED PER NMOCD REQUIREMENTS.

RECEIVED

JAN 24 2008

HOBBS OCD

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 Gene Simer TITLE PRODUCTION SUPERINTENDENT DATE 1-24-08

Type or print name GENE SIMER

E-mail address: gsimer@rkixp.com Telephone No. 575-885-1313

For State Use Only

APPROVED BY: Gayle W. Wink TITLE OC FIELD REPRESENTATIVE II, STATE NMOCD DATE JAN 24 2008  
Conditions of Approval (if any):