

## NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

AUG 3 1 2007

## BILL RICHARDSON

Governor

Joanna Prukop

Cabinet Secretary

Mark E. Fesmire, P.E.
Director
Oil Conservation Division

30-Aug-2007

**SOUTHWEST ROYALTIES INC** 6 DESTA DRIVE SUITE 2100

21355

314/2008 OK to Release

Property Name: WARREN AMERICAN

M-32-9S-33E

MIDLAND, TX 79705-

30-025-26367-00-00

001

Form C-103, Report of Plugging has been approved as to plugging of the Well Bore. Liability under bond is retained until an NMOCD representative has made an inspection of the location and found it to be cleared to comply with OCD rules and regulations. Please check each item in the space provided to indicate that the work has been accomplished and the location is ready for final inspection.

1. All pits have been remediated, filled and leveled.
2. Rat hole and cellar have been filled and leveled.
3. A steel marker 4" in diameter and approximately 4' above mean ground level has been set in concrete to mark the exact location of the plugged well. (Marker must have operator name, lease name, well number and location including quarter/quarter section or unit letter, section, township, range and API well ID number permanently welded, stamped or otherwise engraved into the metal marker.)
4. The location has been leveled as nearly as possible to original top ground contour and has been cleared of all junk and equipment.
5. The dead men and tie downs have been cut and removed.
☑ 6. If a one well lease or last remaining well on lease, the battery and burn pit locations have been remediated, leveled and cleared of all junk & equipment.
7. All environmental concerns have been addressed as per OCD guidelines.
The above are minimum requirements and no plugging bond will be cancelled until all locations for plugged and abandoned wells have been inspected.
When all of the week outlined chave her been done placed notify this office by completing signing and

When all of the work outlined above has been done, please notify this office by completing, signing and returning this letter to us so that our representative will not have to make more than one trip to the location.

I certify that the above work has been done and the above-mentioned lease is ready for OCD inspection and approval.

Name Com Mana

Title Op (ISSF 0/29/0

27398Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103		
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Na	aturai Resources	Revised June 10, 2003 WELL API NO.		
District II	OH CONGERNAL TION BRAYERON		30-025-26367		
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type	e of Lease	
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE X FEE		
District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease		
1220 S. St. Francis Dr., Santa Fe, NM 87505			OG1826		
	CES AND REPORTS ON WEL		7. Lease Name of	or Unit Agreement Name	
(DO NOT USE THIS FORM FOR PROPO			WARREN AME	ERICAN	
DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	ATION FOR PERMIT (FORM C-101)	) FOR SUCH			
1. Type of Well:			8. Well Number		
Oil Well Gas Well	Other P&A'd wellbore		1		
2. Name of Operator			9. OGRID Num	ber _	
Southwest Royalties, Inc.			021355		
3. Address of Operator	T		10. Pool name or Wildcat		
6 Desta Drive, Ste 2100, Midland, 4. Well Location	Texas /9/05		FLYING M SAN	N ANDRES	
4. Well Location					
Unit Letter M :	660 feet from the S	line and 660 feet	from the W li	ne /	
				,	
Section 32		Range 33-E	NMPM LEA	County	
The second secon	11. Elevation (Show whether L 4251 RKB	OR, RKB, RT, GR, etc.,	)		
12 Check A	Appropriate Box to Indicate	Nature of Notice	Report or Other	r Data	
NOTICE OF IN			SEQUENT RE		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR		ALTERING CASING	
TEN ON THE MEDIAL WORK	. Edd / ND ABANDON	TEMEDIAL WOR		ALILINING CASING [	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	LLING OPNS.	PLUG AND 🛛 ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE  COMPLETION	CASING TEST AN	ND 🗆		
OTHER.					
OTHER:		OTHER:			
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.					
REQUEST FOR FINAL INSPECTION	ON.				
I hereby certify that the information :	bove is true and complete to the	best of my knowledge	e and belief.		
				2/20/20	
SIGNATURE Dun	n Howard TITLE	OPERATIONS A	SSISTANTI	DATE 0/29/6 V	
Type or print name DAWN M. HC	WARD E-mail address: dho	ward@claytonwilliam	s.com Telephone	No. 432/686-9927	
(This space for State use)		MIN	H	1	
		YValeus	JOHOUN	21.11-0	
APPPROVED BY	TITLE_			_DATE_ <b>2/4/2008</b>	
Conditions of approval, if any:			CE OFFICER		
		COMPLIANC		ewed	
			MEV	EIVEL	

Inspected 3/4/2008 OK

MAR 0 4 2008

HOBBS OCD