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  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 Water Injector 2. Name of Operator Torch Energy Services, Inc.  3. Address of Operator Unit Letter  Jeff Community County Offices (Show whether DR, RRB, RT, GR, etc.)  State of New Mexico Energy, Minerals and Natural Resources May 27, 21 WELL API NO. 30-025-25682  5. Indicate Type of Lease STATE  FEE  6 6. State Oil & Gas Lease No. 141560  7. Lease Name or Unit Agreement Name Cooper Jal Unit  Cooper Jal Unit  10. Pool name or Wildcat Jalmat; Tans-Y-7R/ Langlie Mattix;7R-Q  4. Well Location Unit Letter  Section  24 Township 248 Range 36E NMPM Lea County	2004 
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1. Type of Well: Oil Well ☐ Gas Well ☒ Other Water Injector 8. Well Number 151  2. Name of Operator  Torch Energy Services, Inc.  3. Address of Operator  2600 W. I-20, Odessa, TX 79763  4. Well Location  Unit Letter A : 998 feet from the South line and 170 feet from the East line Section 24 Township 24S Range 36E NMPM Lea County	1-G
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Section 24 Township 24S Range 36E NMPM Lea County	
3304° GL	·
Pit or Below-grade Tank Application  or Closure	
Pit type NA Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water	Ī
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: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING [	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A	
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB	
	$\boxtimes$
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 Assach wellbore diagram of proposed comple or recompletion.	etion
Objective: Clean out Injector with Bit	
APR 1 7 2003	
1) MIRU Pulling Unit & Above Ground Steel Pit. 3/17/08 2) POOH w/ 2 3/8" IPC Tbg & 5 ½" x 2 3/8" AD-1 Tension Packer.	
2) POOH w/ 2 3/8" IPC Tbg & 5 ½" x 2 3/8" AD-1 Tension Packer. 3) RIH w/ 4 3/4" Mill Tooth Bit, 6- 3 1/2" Drill Collars on 2 7/8" work string.	
4) Clean out well to 3662'.	
5) POOH & laid down work string, drill collars & bit. 6) RIH w/ 5 1/2" AD-1 Packer to 3240'; circulated Annulus w/ Inhibited Packer Fluid.	
7) Set Packer & test Annulus to 420 psig for 30 minutes. Pulled Chart for NMOCD (OCD notified, chart witnessed & accept	ted
by OCD Representative Sylvia Dickey). 3/19/08	tou
8) Place well on injection at 116 BWPD (maximum pressure allowed- 604 psig).	
8) Place well on injection at 116 BWPD (maximum pressure allowed- 604 psig). 9) RDMO Pulling Unit, clean up location, clean & dispose of pit fluids. 3/19/08	
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 bel grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan	low-
MIN	<b>.</b>
SIGNATURE TITLE Production Assistant DATE 4/11/08	
Type or print name Melanie Reyes E-mail address: reyesm@odessa.teai.com Telephone No. (432) 580-8500  For State Use Only	
APPROVED BY: TITLE DATE	
APPROVED BY: TITLE DATE  Conditions of Approval (if any): Where to people or to define the first part of the first part	

ons of Approval (if any): Where is top peof. or top of enjection zone. Preken needs to be wifen 100' of top perforging. zone.

