SIGN.  Type of For St	ATURE or print name tate Use Only OVED BY:	CW Trai	ner -	trainer ( E-mail a	T3wireles	s. com 43	DATE <u>4/2/08</u> 2/687-2505 ephone No. JUN 172008
SIGN.	or print name	CW Trai	ner	trainer (	9 T3wireles	5. com 43	DATE 4/2/08 2/687-2505 ephone No.
514001	ATURE	<i></i>			CUCANIII		DATE 4/3/AV
grade t			When	TITLE	Orotator	- (	oos approved plan
I here	by certify that the tank has been/will be	information at	oove is true and osed according to	complete to the l	oest of my knowledge	and belief. I further	r certify that any pit or below- tive OCD-approved plan .
						The second secon	
						OBRS	
						APR 3 () 201	19
					•	TEVE!	
			•	<b>.</b>		recen	
	<del>4</del> -2-		ell to prod	arne iisning ducina.	before 4-29-	uð in order f	o put
	10	.08 - Pl	on to ros:	ıma flabir -	b of 4 00	001	
	or recompletion	on.				and a substitution of the	or brobosog combication
	13. Describe prop of starting an	oosed or compley proposed wor	eted operations. k). SEE RULE	. (Clearly state al	l pertinent details, and	l give pertinent date	es, including estimated date am of proposed completion
OTI	HER:	_		П	OTHER:	_	П
TEN	MPORARILY ABA LL OR ALTER CA	NDON 🔲	CHANGE PLA MULTIPLE CO	ANS 🗌	REMEDIAL WOR COMMENCE DRI CASING/CEMENT	LLING OPNS.	ALTERING CASING P AND A D
PFI	NOT RFORM REMEDIA	ICE OF IN	TENTION T			SEQUENT RE	
	]	12. Check A			Nature of Notice,		Data
- 1	Pit type Pit Liner Thickness:	_Depth to Ground <sup>,</sup> mi		nce from nearest fres le Tank: Volume		nnce from nearest surfac- astruction Material	e water
- 1	Pit or Below-grade Ta		or Closure			228-296-110E-110E	
			11. Elevation	n (Show whether L	OR, RKB, RT, GR, etc.)		
	Unit Lett Section	er <u>E</u> 27		et from theNor Township 100	S Range 37E	NMPM	the West line County Lea
	4. Well Location		. 1000 .	A. Comment		· · · · · · · · · · · · · · · · · · ·	Devonian
	3. Address of Op P.O. Box 754 Mi	erator <b>P.o.</b> dland TX 7970	Box 3718	)		10. Pool name N. Echols	- 1
į	<ol><li>Name of Opera</li><li>C.W. Trainer</li></ol>	ator				9. OGRID Number	3474
	PROPOSALS.)  1. Type of Well:	Oil Well	Gas Well			8. Well Number	
	DIFFERENT RESER	FORM FOR PROP	OSALS TO DRILL	OR TO DEEPEN OR RMIT" (FORM C-101)	PLUG BACK TO A	Morse	Juli Agreement Name
1	87505		TICES AND RE	PORTS ON WEL	18	7 T NI	Unit Agreement Name
	1000 Rio Brazos Rd., <u>District IV</u> 1220 S. St. Francis Dr			Santa Fe, NM	87505	STATE 56. State Oil & Gas	Lease No.
	1301 W. Grand Ave.,  District III			ONSERVATIC 220 South St. Fi		5. Indicate Type of	Lease
	1625 N. French Dr., H District II		077 0			WELL API NO. 30-025-04991	
	District I		Energy,	Minerals and Na	- · ·		May 27, 2004
	Submit 3 Copies To A Office	Phinhiame Digiter		State of New N	Agrico		Form C-103