Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I 1625 N. French Dr., Hobbs, Mis 244	y, Minerals and Natural Resources	May 27, 2004 WELL API NO.
District II	CONSERVATION DIVISION	30-041-10147
TS:	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410N 1 7 7002		STATE FEE X
District IV 1220 S. St. Francis Dr., Santa F	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505		257420
	REPURIS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRI DIFFERENT RESERVOIR. USE "APPLICATION FOR		MILNESAND UNIT /
PROPOSALS.)		8. Well Number
1. Type of Well: Oil Well Gas Well 2. Name of Operator	Other INJECTION	MSU # 24  9. OGRID Number
2. Name of Operator / EOR OPERATING COMPANY		257420
3. Address of Operator		10. Pool name or Wildcat
ONE RIVERWAY, SUITE 610, HOUSTON,	TX 77056	MILNESAND (SAN ANDRES)
4. Well Location		
Unit LetterJ_:1980:	feet from the SOUTH line and	1980feet from the EASTline
	ownship 8S Range 35E	NMPM County ROOSEVELT
	tion (Show whether DR, RKB, RT, GR, etc.,	
4219' GL  Pit or Below-grade Tank Application □ or Closure □	,	
	istance from nearest fresh water well Dist	ance from nearest surface water
		onstruction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION	N TO: SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AN	ID ABANDON ☐ REMEDIAL WOR	K ☐ ALTERING CASING ☐
TEMPORARILY ABANDON   CHANGE	<u> </u>	<del></del>
PULL OR ALTER CASING   MULTIPL	E COMPL CASING/CEMEN	T JOB
OTHER:	OTHER: Tempo	rary Plug and Abandoned well
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.		
or recompletion.	This Ar	proval of Temporary
START DATE: 5/28/08 COMPLETION DA	ATE: 6/3/08 Abando	oproval of Temporary 06/20/2013
WELL WAS A WATER INJECTOR THAT FAILED IT'S MIT.		
COMPLETED WELL AS A (T/A) TEMPORAIRLLY ABONDONED WELL.		
1.) RU, POOH W/TBG & EXISTING PKR. RIH W/ BIT & SCRAPER TO BOTTOM & CLEAN OUT FILL.		
2.) RIH W/ RETERIVABLE PKR TO 4408. TESTED CSG TO 500 PSI. HELD. TOH W/ RETERIVABLE PKR.		
3.) RU ELECTRIC LINE. SET 2 7/8" X 4 1/2" CIBP @ 4450'. PLACED 35' OF CEMENT ON TOP OF CIBP. RD ELECTRIC		
LINE CO.	ED ANNULLUS TO SOO DSI	
<ul><li>4.) CIRCULATE PACKER FLUID. TESTED ANNULUS TO 500 PSI.</li><li>5.) NIPPLE UP WELL HEAD. RD, MOVE OFF PULLING UNIT.</li></ul>		
6.) 6/4/08. CONDUCTED (MIT) MECHANICAL INTRGRITY TEST TO 500 PSI. TESTED GOOD.		
7.) (4 ½" 9.5# CSG @ 4785', 2 7/8"2 6.5#	CSG @ 4463', PERFS 4653'-4713'	
I haraby cartify that the information above is two	and complete to the best of continuous to to	
I hereby certify that the information above is true grade tank has been/will be constructed or closed accordi	ing to NMOCD guidelines X a general permit \( \square\)	e and Deliei. I further certify that any pit or below-
/ /	ing to 1.1.10 02 guidennes [23, a general per lint [2]	an (attached) and harive Octo-approved plan
SIGNATURE A	TITLE_Sr. Well Operations S	upervisorDATE6/11/08
Type or print name: Lawrence A. Spittler, Jr. E-mail address: lspittler@enhancedoilres.com Telephone No.:432-687-0303  For State Use Only		
30	A Public A	NEED DATE JUN 2 0 2008
APPROVED BY:	TITLE PETROLEUM ENGI	NEER DATE DATE
Conditions of Approval (if any):		

