

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. <b>30-025-28538</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>K-3338</b>
7. Lease Name or Unit Agreement Name <b>GOOD STATE</b>
8. Well Number <b>1</b>
9. OGRID Number <b>181109</b>
10. Pool name or Wildcat <b>BAUM Upper Penn</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4313GR</b>
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 _____

**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 ☐

2. Name of Operator  
**Cameron Oil And Gas Inc.**

3. Address of Operator  
**P.O. Box 1455 Roswell, NM 88201**

4. Well Location  
Unit Letter **K** : **1980** feet from the **South** line and **1980** feet from the **West** line  
Section **26** Township **13S** Range **32E** NMPM **LEA** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**4313GR**

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER <input type="checkbox"/>
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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.

ON 3-3-08 CAMERON OIL & GAS DRILLED OUT THE  
CEMENT AND BRIDGE PLUG AND PLACED THE WELL BACK  
INTO PRODUCTION.  
ON 4-4-08 WELL STARTED PRODUCING.

RECEIVED

APR 18 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 David Sweeney TITLE Operations Manager DATE 4-7-08  
Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ Telephone No. 575-420-1108  
**For State Use Only** \_\_\_\_\_  
APPROVED BY: Chris Williams TITLE DISTRICT SUPERVISOR/GENERAL MANAGER DATE JUL 15 2008  
Conditions of Approval (if any): \_\_\_\_\_