

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

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| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)  |  | WELL API NO.<br>30-025-04099  |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>   |  | 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 2. Name of Operator<br>RHOMBUS OPERATING CO LTD  |  | 6. State Oil & Gas Lease No.  |
| 3. Address of Operator<br>PO BOX 8316, MIDLAND, TX 79708-8316  |  | 7. Lease Name or Unit Agreement Name<br>NORTHWEST EUMONT UNIT                                       |
| 4. Well Location<br>Unit Letter <u>H</u> : <u>2310</u> feet from the <u>NORTH</u> line and <u>330</u> feet from the <u>EAST</u> line<br>Section <u>33</u> Township <u>19S</u> Range <u>36E</u> NMPM LEA County |  | 8. Well Number <u>156</u>   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)   |  | 9. OGRID Number <u>019111</u>   |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>   |  | 10. Pool name or Wildcat<br>EUMONT YATES <i>TR vs - Qn</i>  |
| 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 _____  |  |   |

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

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

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.

06/05-06/06/08 - Repaired tubing leak. Laid down entire string of tubing and ran 128 jts new tubing. Return to production.

RECEIVED  
JUN 13 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 Mabry Kniffen-Wingo TITLE REGULATORY DATE 6/11/08

Type or print name MABRY KNIFFEN-WINGO E-mail address: rhombusop@suddenlink.net Telephone No. 432-683-8873

For State Use Only

APPROVED BY: Chris Williams TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE JUL 22 2008  
Conditions of Approval (if any):