Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. 2040 Pacheco St. 30-025-36452 Santa Fe. NM 87505 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 sIndicate Type of Lease STATE FEE DISTRICT III State Oil & Gas Lease No 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" Cuerno 4 State (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: OIL WELL \mathbf{X} OTHER WELL «Well No. 2Name of Operator 2 **Nearburg Producing Company** 3Address of Operator Pool name or Wildcat Grama Ridge; Morrow, East 3300 N A St., Bldg 2, Suite 120, Midland, TX 79705 ₄Well Location 1899 736 North East Feet From The Line and Feet From The Line Unit Letter **22S** 35E NMPM Lea County Section Township Range 10 Elevation (Show whether DF, RKB, RT, GR, etc.) 3605' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ARANDON REMEDIAL WORK ALTERING CASING PERFORM REMEDIAL WORK PLUG AND ANBANDONMENT TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: OTHER: Spud, surface csg and cmt 12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. Spud well @ 2000hrs 11/4/03. Drld to 1488'. RU csg crew and ran 40 jts 13-3/8" 61# K55 csg. Set @ 1488'. Cmt csg as follows: Lead Slurry - 850 sxs Class C cmt + additives. Tail Slurry - 350 sxs Class C + additives. Circ 220 sxs to pit. WOC 32.25 hrs. Cut off csg, weld on wellhead and NU BOPE and test. PU drlg assembly and TIH. Begin drlg. Hobbs OCD true and complete to the best of my knowledge and belief. I hereby certify that the ormation abo TITLE Production Analyst 11-10-2003 SIGNATURE TYPE OR PRINT NAME Sarah Jord sjordan@nearburg.com TELEPHONE NO. 432/686-8235 x 203 (This space for State Use) OC FIELD REPRESENTATIVE II/STAFF MANAGER

NOV 1 3 2003

DATE