

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

RECEIVED

JAN 23 2009

HOBBSOCD

CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. <input checked="" type="checkbox"/> 30-025-28277
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State A A/C 2
8. Well Number 68
9. OGRID Number 194849
10. Pool name or Wildcat Eunice 7 rvrs Queen-South

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
GL-3585

Pit or Below-grade Tank Application ☐ or Closure ☐

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: T/A Test ☒

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.

Test Date: 1-22-09

1. Load casing with 2% KCL water. (Packer @ 3714')
2. Pressure test casing surface to 3714' to 530# for 30 minutes. Surface casing neutral during test.
3. Record test on chart. (OCD Rep. Mark Whitaker witness test) See attached chart.
4. Request TA status for 5 years.

This Approval of Temporary
Abandonment Expires 1-26-2014

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 Joel Sisk TITLE Production Foreman DATE 1-23-09

Type or print name Joel Sisk E-mail address: jsisk@petrohawk.com Telephone No .575-394-2574

For State Use Only

APPROVED BY: Carmy W. Hill DISTRICT 1 SUPERVISOR DATE JAN 26 2009
Conditions of Approval (if any):

