Mark Hoskins 432-614-4270 p.5 DAILOY NIVE CLAUM CONTROL TO LAST ALTON ONL CANDING K1001/007 Submit 3 Copies To Appropriate District Confice State of New Mexico
Office District Municipals and Natural Resources Form C-103 May 27, 2004 1625 N. French Dr., Hobbs, NM 88240 WELL API NO. District II District II
1301 W Grand Ave., Artesia, NM88216 EB 2 01000 ONSERVATION DIVISION 30-025-28197 5. Indicate Type of Lease 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410BBS STATE [ FEE Santa Fe. NM 87505 District IV 6. State Oil & Gas Lease No. 1220 S St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A FOWLER B DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH 8. Well Number PROPOSALS.) 1. Type of Well: Oil Well 🔀 001 Gas Well | Other 2. Name of Operator 9. OGRID Number STATE OF NEW MEXICO FORMERLY PRONGHORN MGT. 12281 3. Address of Operator 10. Pool name or Wildcat 1625 N. FRENCH DRIVE HOBBS, NM 88240 HOBBS (G-SA) 4. Well Location feet from the SOUTH line and 2317 feet from the WEST line Unit Letter K: 2310 Section 6 Township 198 Range 38E NMPM County LEA, NM 11. Elevation (Show whether DR, RKB, RT, GR, etc.) Pit or Below-grade Tank Application ar Closure Depth to Groundwater\_ \_\_\_Distance from nearest fresh water well\_\_ \_\_ Distance from nearest surface water\_ Pit Lizer Thickness: Below-Grade Tank: Volume bbis: Construction Material 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON 🔲 REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. P AND A × **PULL OR ALTER CASING** MULTIPLE COMPL **CASING/CEMENT JOB** OTHER: OTHER: 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.

I hereby certify that the information above is true and ogende tank has been/will be constructed or closed according to N	complete to the best of my know	ledge and belief. I further o	certify that any pit or helow- we OCD-approved plan
SIGNATURE MAL MAN	TITLE_AGENT	DATE2-20	-09
Type or print name	E-mail address:	Telephone No.	
APPROVED BY: Lamp W. All	TITLE DISTRICT 1	SUPERVISOR r	FEB 2 4 2009
Conditions of Approval (if any):			. — —

## MAYO MARRS CASING PULLING INC. **BOX 863** KERMIT, TEXAS 79745

## NM0CD

Lease:

FOWLER B 14992 # 1

Project: P & A

4/24/2008

SET CIBP @ 4060' DUMPING 35' OF CEMENT ON TOP

4/25/2008

SPOT 25 SACKS @ 2830' SPOT 25 SACKS @ 1700'

PERF @ 410' AND SPOT 60 SACKS @ 460' TO SURFACE

PUMPED PLUGGING MUD BETWEEN ALL PLUGS INSTALLED DRY HOLE MARKER