Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I RECEIVE For gy,	, Minerals and Natural Resources	May 27, 2004
		WELL API NO. / 30-025-01138
1301 W. Grand Ave, Artesia, NM 882100 (1) SOIL C	ONSERVATION DIVISION	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd , Azted NOBISSOCD	220 South St. Francis Dr.	STATE S FEE
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S St. Francis Dr., Santa Fe, NM 87505		B-9385
SUNDRY NOTICES AND RE		7. Lease Name or Unit Agreement Name
(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		New Mexico "AN" State
PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other		8. Well Number 3
2. Name of Operator		9. OGRID Number
CrownQuest Operating, LLC		213190
3. Address of Operator		10. Pool name or Wildcat
303 Veterans Arprk Ln, Ste 5100 Midland, TX 79710		Saunders (Permo-UPenn)
4. Well Location		
	et from the <u>South</u> line and <u> </u>	
	ownship 14S Range 33E	NMPM County Lea
	on (Show whether DR, RKB, RT, GR, etc	
Pit or Below-grade Tank Application or Closure	04' GR	
	ance from nearest fresh water well Dis	stance from nearest surface water
		onstruction Material
12. Check Appropriate	Box to Indicate Nature of Notice,	-
		SSEQUENT REPORT OF:
· - · · · · · · · · · · · · · · · · · ·	ABANDON  REMEDIAL WOF	<del></del>
TEMPORARILY ABANDON ☑ CHANGE P		RILLING OPNS. P AND A
PULL OR ALTER CASING   MULTIPLE	COMPL CASING/CEMEN	11 JOB
OTHER:	☐ OTHER:	
13. Describe proposed or completed operation of starting any proposed work). SEE RU or recompletion.	ns. (Clearly state all pertinent details, ar LE 1103. For Multiple Completions: A	nd give pertinent dates, including estimated date ttach wellbore diagram of proposed completion
1. Notify OCD 24 hrs pri	ior to commencement of.	TA procedure.
2. RIH w/CIBP on wirelir	ne and set @ $\pm$ 9380'.	
3. Run MIT with chart @	500 psi for 30 min.	
4. Forward Sundry Notice with chart to OCD.		
4. Forward buildry Notice	with chart to ocb.	
	,	
Condition	n of Approval: Notify OCD Hobbs	-
office 24	hours prior to running MIT Test &	& Chart
I hereby certify that the information above is true a	and complete to the best of my knowled	ge and belief. I further certify that any pit or below-
grade tank has been/will be constructed or closed according	g to NMOCD guidelines , a general permit	or an (attached) alternative OCD-approved plan .
SIGNATURE ON TOTAL	TITLE Mgr, Specia	l Projects DATE 3/12/09
Don Rogers		
	drogers@crown	
Type or print name For State Use Only	drogers@crown E-mail address:	relephone No.

APPROVED BY: Tamy W. J. DISTRICT 1 SUPERVISOR
Conditions of Approval (if any):

DATE MAR 1 8 2009