Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
District I 1625 N French Dr., Hobbs, NM 88240			June 19, 2008 WELL API NO.	
District III  District III  District III  District III  District III  ADD: (1) 1220 South St. Francis Dr.			3000500662 V	
			5. Indicate Type of Lo STATE X	ease FEE 🔲
District IV 1220 S St. Francis Dr., Santa Fe, NM 87505  120 S St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Le E-8664	ase No.
SUNDRY NOTICES AND REPORTS ON WELLS (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			7. Lease Name or Unit Agreement Name, SOUTH CAPROCK QUEEN UNIT	
PROPOSALS)			8. Well Number	
1. Type of Well: Oil Well Gas Well Other INJECTION  2. Name of Operator			9. OGRID Number	
KEVIN O BUTLER & ASSOCIATES, INC.			12627	<u>,                                      </u>
3. Address of Operator PO BOX 1171, MIDLAND, TEXAS 79702			10. Pool name or Wild 08559 CAPROCK QU	
4. Well Location	10 17102		08339 CAFROCK QU	EEN
Unit LetterO19	80 feet from theEAST	line and	_990feet from the _	SOUTH line
Section 30		Range 311	E NMPM CHAV	— —
	11. Elevation (Show whether DR 3448' GR	, RKB, RT, GR, etc.)	178.4	
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	< ALT	ERING CASING
TEMPORARILY ABANDON				ND A
DOWNHOLE COMMINGLE	MOLTIPLE COMPL	CASING/CEMENT	JOR []	
OTHER: REQUEST MIT	X	OTHER: TEMPOR	RARY ABANDONMENT	
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.				
Request witnessed MIT with intent to file the following subsequent:				
1) Well Status - Request Temporary Abandonment 2) Effective – Upon successful MIT				
3) Reason - Unable to operate				
4) Future Plans – Rework an		Condition of	Approval: Notify OCI	D Wahha
5) Date of Future Plans – 200		office 24 hou	urs prior to running M	IT Test & Chart
	<i>,</i>	<u></u>		
Spud Date:	Rig Release Da	te:		
L				
I hereby certify that the information a	have is two and complete to the be	1 1	11 11 0	
r nercoy certify that the information a	bove is true and complete to the be	est of my knowledge	and belief.	
SIGNATURE	TITLE Pres	sident/Owner DAT	TE 4-24-09	
Type or print name KEVIN O BUT For State Use Only			HONE: 432-682-1178	
	(v) //·// DISTI	NCT 1 SUPER	VISOFI I	APR 2 8 2009
APPROVED BY: Conditions of Approval (if any):	TITLE TITLE		DATE_	