| Submit 3 Copies To Appropriate District Office  | State of New Me                       | Form C-103            |                                     |                                    |                 |
|---|---------------------------------------|-----------------------|-------------------------------------|------------------------------------|-----------------|
| <u>District I</u> Energy, Minerals and Natural Resources  |                                       |                       | TUDI I ADINO                        | June 19                            | ), 2008         |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II<br>1301 W. Grand Ave., Artesia, NM 88210 CENTER ON DIVISION  |                                       |                       | WELL API NO.                        | 30-025-38932                       |                 |
| District III  |                                       |                       | 5. Indicate Type of Lease           |                                    |                 |
| District III 1000 Rio Brazos Rd., Aztec, NM 87410 JUN 03 2019220 South St. Francis Dr. Santa Fe, NM 87505   |                                       |                       | STATE X 6. State Oil & Gas          |                                    |                 |
| 1000 Rio Brazos Rd., Aztec, NM 87410 JUN U 3 700320 South Strate Strain |                                       |                       | Pr                                  | op#25191                           |                 |
| 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   |                                       |                       |                                     | Unit Agreement Na<br>YATES SAND UN |                 |
| PROPOSALS)  1. Type of Well: Oil Well Gas Well x Other Water Injection Well   |                                       |                       | 8. Well Number                      | 240                                |                 |
| 2. Name of Operator  MELROSE OPERATING CO   |                                       |                       | 9. OGRID Numbe                      | er<br>184860                       | /               |
| 3. Address of Operator 1000 W. WILSHIRE, SUITE 223, OKLAHOMA CITY, OK 73116   |                                       |                       | 10. Pool name or Jalmat, Yates, Tar | Wildcat                            |                 |
| 4. Well Location  |                                       |                       |                                     |                                    |                 |
| Unit Letter N 6 Section 2   | feet from the SOUTH  Township 22S Ran |                       | 5feet from the<br>NMPM              | <del></del>                        | · 🖌 📗           |
| Section 2 Township 22S Range 35E NMPM County LEA  11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |                                       |                       |                                     |                                    |                 |
| 3590° GL  |                                       |                       |                                     |                                    |                 |
| 12 Chaok An   | propriate Box to Indicate Na          | oture of Notice       | Panart or Other                     | Doto                               |                 |
| •   |                                       | ature of Notice,      | Report of Other i                   | Data                               |                 |
|   |                                       |                       | SEQUENT REF                         |                                    | <u> </u>        |
| PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK TEMPORARILY ABANDON  CHANGE PLANS COMMENCE DRII  |                                       |                       |                                     | ALTERING CASING P AND A            | <i>i</i> ∐<br>□ |
| TEMPORARILY ABANDON   |                                       |                       |                                     |                                    |                 |
| DOWNHOLE COMMINGLE  |                                       |                       |                                     |                                    |                 |
| OTHER:  | x                                     | OTHER:                |                                     |                                    |                 |
| 13. Describe proposed or complete   | ed operations. (Clearly state all p   | ertinent details, and |                                     |                                    |                 |
|   | . SEE RULE 1103. For Multiple         | e Completions: Att    | ach wellbore diagra                 | m of proposed com                  | pletion         |
| or recompletion.  |                                       |                       |                                     |                                    |                 |
|   |                                       |                       |                                     |                                    |                 |
| Melrose will performing MIT Test on Jalmat #240 WIW on Friday, June 5 <sup>th</sup> , 2009, at 10:30 NM MST   |                                       |                       |                                     |                                    |                 |
|   |                                       |                       |                                     |                                    |                 |
|   |                                       |                       |                                     |                                    |                 |
|   |                                       |                       |                                     |                                    |                 |
|   |                                       |                       |                                     |                                    |                 |
|   |                                       |                       |                                     |                                    |                 |
|   |                                       |                       |                                     | $\overline{}$                      |                 |
| Spud Date:  | Rig Release Dat                       | te:                   |                                     |                                    |                 |
| <u> </u>  |                                       | <u> </u>              | WFX-                                | 290                                |                 |
| I hereby certify that the information abo   | eve is true and complete to the be    | st of my knowledge    |                                     | 0 (0                               |                 |
|   | 1                                     | ,                     |                                     |                                    |                 |
| SIGNATURE   | TITLEForma                            | an                    | DAT                                 | E6/3/09                            |                 |
| Type or print nameCam Robbins For State Use Only  | E-mail address:n                      | naximum@valornet      | co PHON                             | E: _575-390-4666_                  |                 |
|   | // JISTF                              | RICT 1 SUPER          | VISOR                               | JUNO                               | 8 2009          |
| APPROVED BY: Cong () >  | TITLE                                 |                       | DA7                                 | TE                                 |                 |
| Conditions of Approval (if any):  |                                       |                       |                                     |                                    |                 |