

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

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

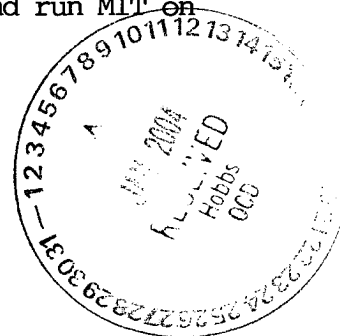
Form C-103
Revised May 08, 2003

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 PROPOSALS.)		WELL API NO. 30-025-11326
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Injection		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Betwell Oil & Gas		6. State Oil & Gas Lease No. 8910082510 FEE
3. Address of Operator P.O. BOX 22577, Hialeah, Florida 33002		7. Lease Name or Unit Agreement Name Langlie Mattix Woolworth Unit
4. Well Location Unit Letter <u>E</u> : <u>24</u> feet from the <u>SOUTH</u> line and <u>37</u> feet from the <u>EAST</u> line Section <u>33</u> Township <u>24 S</u> Range <u>37 E</u> NMPM County <u>LEA, NM</u>		8. Well Number 802
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3199' RT		9. OGRID Number 2193
		10. Pool name or Wildcat Langlie Mattix 7 Rivers & Grayburg

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input checked="" type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

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.

Well has 7" Csg & Csg Leak, Intend to run 4 1/2" Csg to appx. 3000' and cement Csg to surface. Run Injection tring back and run MIT on well to check Csg. Integrity. Return well to Injection.



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Robert C. Bredemeyer TITLE Production Supt. DATE 12-19-2003

Type or print name Robert C. Bredemeyer Telephone No. 325-338-0610

(This space for State use)

APPROVED BY Chris Williams TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER

Conditions of approval, if any:

DATE JAN 06 2004