

Office *

Energy, Minerals and Natural Resources

October 13, 2009

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

87505

RECEIVED

JAN 08 2010

HOBBSSUCD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-041-10177

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

E-8875

7. Lease Name or Unit Agreement Name

D'Neill STATE SWD

8. Well Number

1-L

9. OGRID Number

13688

10. Pool name or Wildcat

Prairie Cisco South

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.)

1. Type of Well: Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

M & W of Lovington, Inc

3. Address of Operator

Box 922 Lovington, NM 88260

4. Well Location

Unit Letter L : 1980 feet from the South line and 660 feet from the West line

Section 16 Township 8S Range 36-E NMPM County Roosevelt

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

4108

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
 DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ ~~PANDA~~ ☒
 CASING/CEMENT JOB ☐

OTHER: TA ☐

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This Approval of Temporary
Abandonment Expires 1-12-2011

Spud Date:

Rig Release Date:

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

SIGNATURE

Weldon Millsap

TITLE

President

DATE 1-6-00

Type or print name

Weldon Millsap

E-mail address:

PHONE 575-396-4685

For State Use Only

APPROVED BY:

Campbell, Hil

TITLE

DISTRICT 1 SUPERVISOR

DATE

JAN 12 2010

Conditions of Approval (if any):

