

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

October 13, 2009

RECEIVED

## OIL CONSERVATION DIVISION

JAN 25 2010

1220 South St. Francis Dr.

Santa Fe, NM 87505

HOBBSD

WELL API NO. ✓  
30-025-28474 ✓

5. Indicate Type of Lease

STATE ☒FEE ☐

Fd

6. State Oil &amp; Gas Lease No.

NM LC 030132 (b)

7. Lease Name or Unit Agreement Name

Cities Federal ✓

8. Well Number 2 ✓

9. OGRID Number

021355 ✓

10. Pool name or Wildcat SWD ✓

SEVEN RIVERS QUEEN 96132

## 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 SWD

2. Name of Operator

SOUTHWEST ROYALTIES, INC. ✓

3. Address of Operator

6 DESTA DRIVE, STE 2100, MIDLAND, TEXAS 79705

4. Well Location

Unit Letter M : 660 feet from the S line and 660 feet from the W line

Section 20

Township 22S

Range 36E

NMPM

LEA

County ✓

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

3539' GR

## 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 ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐P AND A ☐CASING/CEMENT JOB ☐OTHER: ☐

OTHER: MIT

☒

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.

WORKOVER PERFORMED AFTER FAILED MIT 12/10/09.

WELL BACK ON AS ACTIVE INJECTION WELL AFTER SUCCESSFUL WITNESSED MIT DATED 1/13/10.

CHART ATTACHED.

Spud Date:

11/11/83

Rig Release Date:

11/16/83

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

SIGNATURE

TITLE OPERATIONS ASSISTANT

DATE 1/21/10

Type or print name DAWN M. HOWARD E-mail address: dhoward@claytonwilliams.com PHONE: 432/688-3267

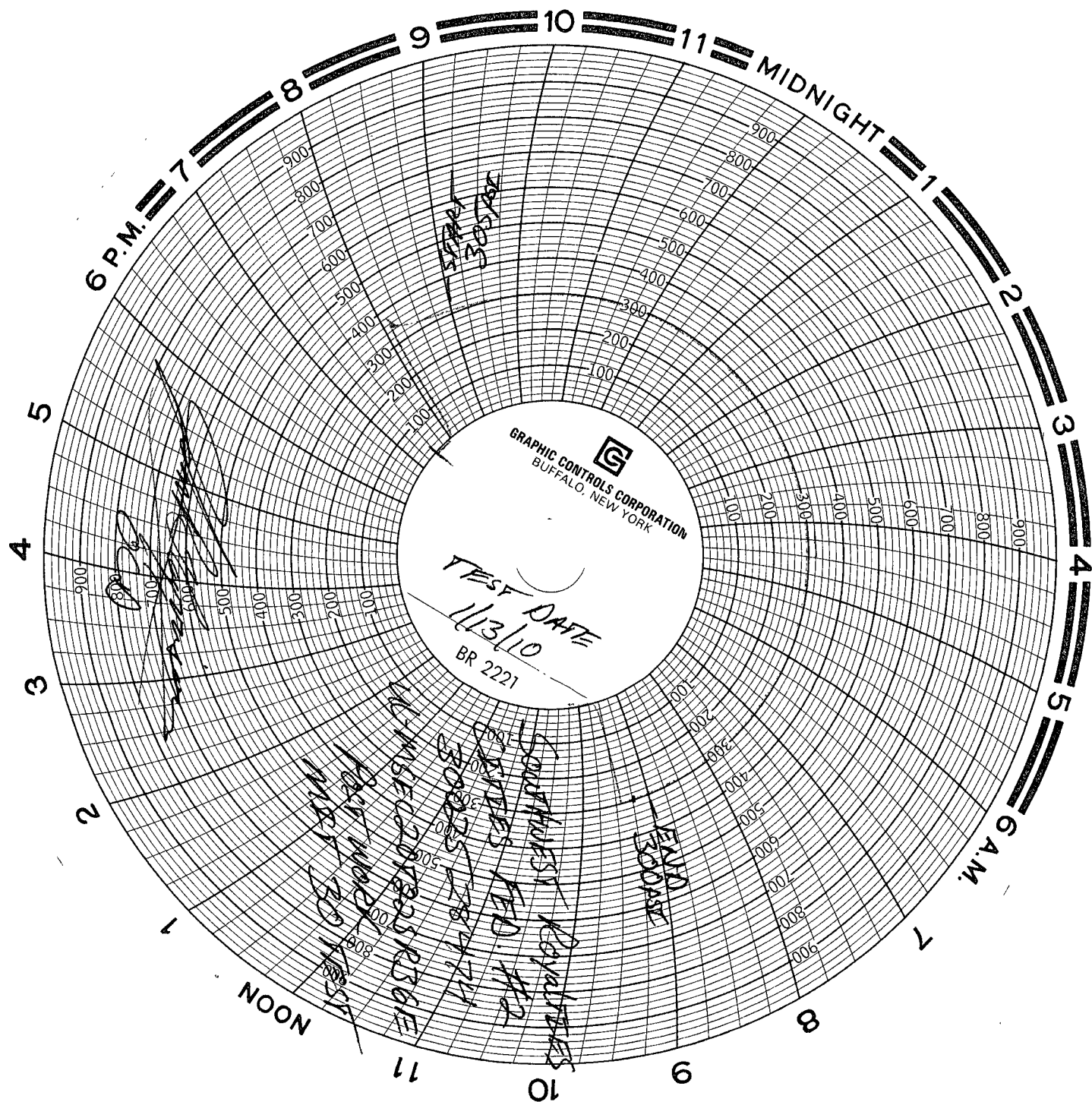
For State Use Only

APPROVED BY:

TITLE DISTRICT 1 SUPERVISOR

DATE JAN 26 2010

Conditions of Approval (if any)



Calibration  
8-21-09  
PRM Services  
unit #43  
ISAAC TRODIN