

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

RECEIVED
FEB 05 2010
HOBBS

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

| |
|---|
| WELL API NO. 30-025-29851 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. LG-3345 |
| 7. Lease Name or Unit Agreement Name SANMAL QUEEN UNIT |
| 8. Well Number 003 |
| 9. OGRID Number 020989 |
| 10. Pool name or Wildcat SANMAL QUEEN |

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 INJECTION ☒

2. Name of Operator
SMITH & MARRS, INC.

3. Address of Operator
P.O. BOX 863 KERMIT, TX 79745

4. Well Location
Unit Letter K: 1900' feet from the SOUTH line and 2310 feet from the WEST line
Section 1 Township 17S Range 33E NMPM County LEA

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

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

| | | | |
|--|---|---|--|
| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input checked="" type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS <input type="checkbox"/> | P AND A <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> | |
| DOWNHOLE COMMINGLE <input type="checkbox"/> | | | |
| OTHER: <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1-25-09 POH WITH PACKER-RIH WITH REDRESSSED PACKER-CIRCULATE PACKER FLUID-SET PACKER

1-25-10 TEST ANNULUS AND CHART AT 550# PSI FOR 30 MINUTES

DENIED

MAX 2 HR. clock on chart
Need PKR setting
Need Top Perfs
2-5-10
575-393-6161
EXT 114

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 Terri Jennings TITLE Production Analyst DATE 2-3-2010

Type or print name Terri Jennings E-mail address: jjennings@mayomarrs.net PHONE: 505-586-3076

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____

