Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103 Revised March 25, 1999	
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240			WELL API NO.		
District II OIL CONCEDVATION DIVISION			30-025-22352		
811 South First, Artesia, NM 88210 District III 1220 South St. Francis Dr.			5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe NM 87504				STATE FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87504				6. State Oil & Gas Lease No. E-906	
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or Unit Agreement Name:	
(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				West Panger Unit	
PROPOSALS.)				West Ranger Unit	
1. Type of Well:					
Oil Well Gas Well Other 2. Name of Operator				8. Well No.	
EverQuest Energy Corporation				16	
3. Address of Operator				9. Pool name or Wildcat	
10 Desta Drive, Ste 300E, Midland, Texas 79705				Ranger Lake Penn	
4. Well Location					
Unit Letter: K - 1980 feet from the South line and 1980 feet from the West line					
Section: 26 Tow	rnship: 12S Range:	34F	NMPM:	County: L	ea
Section. 20 Tow	10. Elevation (Show w				e Turk da ka
RKB 4160' ASL					
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUE			SEQUENT REI		
PERFORM REMEDIAL WORK	☑ PLUG AND ABANDON		REMEDIAL WOR	к 🗆	ALTERING CASING
TEMPORARILY ABANDON	☐ CHANGE PLANS		COMMENCE DRI	LLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AND CEMENT JOB	ND 🗆	ABANDONNENT
071170					
OTHER:			OTHER:		
12. Describe proposed or compl of starting any proposed work or recompilation.					
Re-activate well in the P new perforations on rod	ennsylvanian perfs 10245-2	280', add ₁	perfs 10285-329', st	timulate and produce	e well through old and
now portorations on rou	panp.				034562
Anticipated completion	date is 8-1-2004.				123.00/893
	6-1-2004	1		/	3
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE:	Muy	TITLE:_1	President		DATE: <u>/-22-04</u>
Type or print name Terry M. I	Ouffey			Telephor	ne No. (432) 686-9790
(This space for State use)					
APPPROVED BY ACTION WINK Conditions of approval, if any: Out of FIELD REPRESENTATIVE ITSTAFF MANAGER DATE JAN 2 8 2004					
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