

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

June 19, 2008

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| <p><b>RECEIVED</b><br/>OIL CONSERVATION DIVISION<br/>MAR 12 2010<br/>1220 South St. Francis Dr.<br/>Santa Fe, NM 87505</p>   |  | <p>WELL API NO.<br/>30-025-08626</p>  |
| <p>1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> Water Injection Well <input checked="" type="checkbox"/></p>                                 |  | <p>5. Indicate Type of Lease<br/>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p> |
| <p>2. Name of Operator<br/>MELROSE OPERATING CO</p>  |  | <p>6. State Oil &amp; Gas Lease No.<br/>Prop#25191</p>  |
| <p>3. Address of Operator<br/>1000 W. WILSHIRE, SUITE 223, OKLAHOMA CITY, OK 73116</p>   |  | <p>7. Lease Name or Unit Agreement Name<br/>JALMAT FIELD YATES SAND UNIT</p>                                |
| <p>4. Well Location<br/>Unit Letter <u>N</u> : <u>660</u> feet from the <u>SOUTH</u> line and <u>2310</u> feet from the <u>WEST</u> line<br/>Section <u>14</u> Township <u>22S</u> Range <u>35E</u> NMPM County <u>LEA</u></p> |  | <p>8. Well Number <u>145</u></p>  |
| <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br/>3597' GL</p>   |  | <p>9. OGRID Number<br/>184860</p>   |
| <p>10. Pool name or Wildcat<br/>Jalmat, Yates, Tansell, 7-Rives</p>  |  | <p>10. Pool name or Wildcat<br/>Jalmat, Yates, Tansell, 7-Rives</p>   |

## 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: INJECTION MIT

X

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.

Performed Injection MIT, 5/12/09, 340#s for 30 min, Witnessed by OCD/John Harrison, SEE attached Chart

Spud Date:

Rig Release Date:

R-2243

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

SIGNATURE

Cam Robbins

TITLE Forman

DATE 5/12/09

Type or print name Cam Robbins

E-mail address: maximum@valornet.co

PHONE: 575-390-4666

For State Use Only

APPROVED BY:

E. Sanchez

TITLE

STAFF MGR

DATE

3-15-10

Conditions of Approval (if any).

