

Submit 3 Copies To Appropriate District
Office
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

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised May 08, 2003

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

WELL API NO. 30-025-11664
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name B.M. Justis "A"
8. Well Number 006
9. OGRID Number 002175
10. Pool name or Wildcat Jalmat Tansill Yates 7 Rivers

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
Bettis, Boyle & Stovall

3. Address of Operator
P.O. Box 1240, Graham, TX 76450

4. Well Location

Unit Letter H : 2310 feet from the N line and 330 feet from the E line

Section 20 Township 25S Range 37E NMPM 1 lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3057 DF

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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Temporary Abandon ☒

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.

10/22/03 - MIRU Rotary Wireline Service, RIH & set CIPB @ 2840' (perfs @ 2912-2918')

Pressure test 7" csg. to 500 # for 30 minutes, held good.

location & temporarily abandoned well.

This Approval of Temporary
Abandonment Expires 10/22/08

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

SIGNATURE Kim Ligon TITLE Regulatory Analyst DATE 01/14/04

Type or print name Kim Ligon Telephone No. 940-549-0780

(This space for State use)

APPROVED BY Larry W. Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE JAN 30 2004

Conditions of approval, if any:



