

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

June 19, 2008

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

RECEIVED

APR 27 2010

| | |
|---|---|
| WELL API NO. 30-025-24615 | ✓ |
| 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> | |
| 6. State Oil & Gas Lease No. | |
| 7. Lease Name or Unit Agreement Name Fluor | ✓ |
| 8. Well Number 3 | ✓ |
| 9. OGRID Number 20497 | |
| 10. Pool name or Wildcat Langlie Mattix - 7 Rurs-Q-Graborg | ✓ |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | |

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

Seely Oil Company

3. Address of Operator

815 W. 10th St., Ft. Worth, TX 76102

4. Well Location

Unit Letter: K 2310 feet from the South line and 1650 feet from the West line

Section 35 Township 22S Range 37E NMPM Lea County

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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐DOWNHOLE COMMINGLE ☐OTHER: ☐

SUBSEQUENT REPORT OF:

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

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.

Finished repairing parted rods.

Well is producing.

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

SIGNATURE David L. Henderson TITLE: Executive Vice PresidentDATE 4/23/10

Type or print name: David L. Henderson

E-mail address: dhenderson@seelyoil.com

PHONE: 817-332-1377

For State Use Only

APPROVED BY: [Signature] TITLE: SUPERVISORDATE 4-27-10

Conditions of Approval (if any):