Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources	Form C-103 May 27, 2004
District I District II District II	EIVE CONSERVATION DIVISION	WELL API NO. 30-025-03199
District III 1000 Rio Brazos Rd., Aztec, NM 87476 1	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE X FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NMOBBSOCD 87505		6. State Oil & Gas Lease No. 25250
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		7. Lease Name or Unit Agreement Name NEPQ
PROPOSALS.) 1. Type of Well: Oil Well X, Gas Well Other		8. Well Number #019 /
2. Name of Operator Melrose Operating		9. OGRID Number 184860
3. Address of Operator 20333 STATE HIGHWAY 249, HOUSTON TX, 77077		10. Pool name or Wildcat PEARL-QUEEN
4. Well Location Unit Letter K: 1980 feet from the SOUTH line and 2180 feet from the WEST line		
Section 23		5E NMPM County Lea
Pit or Below-grade Tank Application or C		[Backetti Atta Atta Atta Atta Atta Atta Atta A
Pit Lines Thickness mil		bistance from nearest surface water
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
	PLUG AND ABANDON REMEDIAL WO	BSEQUENT REPORT OF: ORK
PULL OR ALTER CASING I	MULTIPLE COMPL CASING/CEME	NT JOB
OTHER:	☐ OTHER:	Install Sign
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.		
Install Well Sign		
I hereby certify that the information aborate tank has been/will be constructed or the	ove is true and complete to the best of my knowled sed according to NMOCD guidelines , a general permit	dge and belief. I further certify that any pit or below-
SIGNATURE Con Vola		DATE DEC.2, 2010
Type or print nameCam Robbins 1. For State Use Quly	E-mail address:maximum@valornet	.comTelephone No575-390-4666
APPROVED BY: Conditions of Approval (if any);	TITLE SMAY	DATE 12-9-10
Conditions of Approvin (Hally)		