

Submit 1 Copy 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  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
October 13, 2009

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	WELL API NO. 30-025-29694 ✓ 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> 6. State Oil & Gas Lease No. 53770 7. Lease Name or Unit Agreement Name SAN SIMON STATE ✓ 8. Well Number 004 ✓ 9. OGRID Number 240713 ✓ 10. Pool name or Wildcat SAN SIMON YATES ✓
2. Name of Operator THE COLBORN COMPANY INC. ✓	
3. Address of Operator P.O. BOX 1804 EUNICE, NEW MEXICO 88231	
4. Well Location Unit Letter N : 990 feet from the SL line and 1650 feet from the WL line Section 04 Township 22S Range 35E NMPM County LEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3625 FT RKB	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> XX	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

RUPU- TIH WITH CIBP . SET AT 370 FEET .TOOH WITH TUBING . LOAD BAILER WITH CEMENT(PORTLAND TYPE I-II)  
DUMP 42 FEET OF CEMENT ON TOP OF CIBP. TOOH WITH BAILER. SDON.  
TEST PLUG TO 500# FOR 30 MINUTES.  
TIH WITH CIBP . SET AT 50 FEET . TOOH WITH TUBING. LOAD BAILER WITH CEMENT ( PORTLAND TYPE II )  
DUMP CEMENT ON TOP OF PLUG.  
RIG DOWN . INSTALL PLUGGED WELL MARKER AND CLEAN UP LOCATION

Spud Date:

Rig Release Date:

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

SIGNATURE  
2011

*Rance Colborn*

TITLE OWNER

DATE MARCH, 04-

Type or print name RANCE COLBORN  
@MSN.COM

E-mail address: IMACHINE

PHONE: 575-394-2463

For State Use Only

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any)

**DENIED**

*Not Applicable Procedure*  
*W. Hill*  
*3-16-11*  
*575-393-6161*  
*ext. 102*

**DENIED**