

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.
30-025-27013 00060

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-9639

7. Lease Name or Unit Agreement Name
Moore Devonian Coop
SWD System

8. Well No. 2

9. Pool name or Wildcat
Moore Devonian

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 Salt Water Disp

2. Name of Operator
Rhombus Energy Company

3. Address of Operator
200 N. Loraine, Suite 1270

4. Well Location
Unit Letter E : 1980' Feet From The North Line and 660' Feet From The West Line

Section 24 Township 22-S Range 32-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4355'

11. 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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. 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.

Run tubing to +/- 1600'. Pump 400 sx cement. WOC. Tag top of cement or top of fish at 1768'. Spot 100' cement plug if necessary. Spot cement plug across bad casing 900'-700'. Spot plug at surface and install dry hole marker.

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

SIGNATURE Gregory D. Cielinski TITLE President DATE Jan 31, 1996

TYPE OR PRINT NAME Gregory D. Cielinski TELEPHONE NO. (915) 683-8873

(This space for State Use)

ORIGINAL SIGNED BY
CARY WINK
FIELD OFFICE

FEB 15 1996

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: