

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  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

|                                                                                                     |
|-----------------------------------------------------------------------------------------------------|
| WELL API NO.<br><u>30-025-03558</u>                                                                 |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br><u>V-2522</u>                                                       |
| 7. Lease Name or Unit Agreement Name<br><u>Fox "A" STATE</u>                                        |
| 8. Well No. <u>4</u>                                                                                |
| 9. Pool name or Wildcat<br><u>ALLISON FENN</u>                                                      |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br><u>4055 GL</u>                                |

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:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 2. Name of Operator<br><u>LAYTON ENTERPRISES, INC.</u>                                                                                                                                                                      |
| 3. Address of Operator<br><u>3103 79th St Lubbock, Tx. 79423</u>                                                                  | 4. Well Location<br>Unit Letter <u>B</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>EAST</u> Line<br>Section <u>2</u> Township <u>9S</u> Range <u>36E</u> NMPM <u>LEA</u> County <u></u> |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br><u>4055 GL</u>                                                              |                                                                                                                                                                                                                             |

|                                                                               |                                                     |
|-------------------------------------------------------------------------------|-----------------------------------------------------|
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data |                                                     |
| NOTICE OF INTENTION TO:                                                       | SUBSEQUENT REPORT OF:                               |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                                | REMEDIAL WORK <input type="checkbox"/>              |
| TEMPORARILY ABANDON <input type="checkbox"/>                                  | ALTERING CASING <input type="checkbox"/>            |
| PULL OR ALTER CASING <input type="checkbox"/>                                 | COMMENCE DRILLING OPNS. <input type="checkbox"/>    |
| OTHER: <input type="checkbox"/>                                               | PLUG AND ABANDONMENT <input type="checkbox"/>       |
|                                                                               | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
|                                                                               | OTHER: <input type="checkbox"/>                     |

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.

Re-ENTRY OF THIS T & E WELL APPROVED ON 8-1-91 ON  
FORM C-101 FILED 7-26-91. TO ATTEMPT TIE BACK OF  
5 1/2" CASING SINCE @ 6000' & RE-COMPLETION IN EUGENE ZONE  
HOLE CONDITIONS (LARGE WASHOUT) APPEARS TO MAKE TIE BACK  
VERY DIFFICULT IF NOT IMPOSSIBLE.  
INTEND TO RUN 5 1/2" CASING TO APPROX 5950' AND PUMP  
BACK TO 8 3/8" INTERMEDIATE CASING. WILL THEN PATCHMATE  
AND TEST FOR PRODUCTION FROM SAN ANDRES ZONE 9800'-9950'

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

SIGNATURE Donald R. Layton TITLE PRESIDENT DATE 9-6-91  
TYPE OR PRINT NAME DONALD R. LAYTON TELEPHONE NO. 806/745-963

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: