

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

WELL API NO. <u>3002522241</u>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <u>K-4104</u>
7. Lease Name or Unit Agreement Name: <u>STATE K</u>
8. Well No. <u>1</u>
9. Pool name or Wildcat <u>VADA PENN</u>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>4241 RDB</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:  
Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator  
WMS OIL INC.

3. Address of Operator  
P.O. BOX 162 TATUM, NM 88267

4. Well Location  
Unit Letter C : 660 feet from the SOUTH line and 1980 feet from the EAST line  
Section 2 Township 10-S Range 33-E NMPM County LEA

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 ☐ MULTIPLE COMPLETION ☐  
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

*Currently talking to companies to try to sell the well. If well isn't sold, we intend to restore the well to production.*

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

SIGNATURE Sonny Groesbeck TITLE Owner-Director DATE 9-20-00  
Type or print name SONNY GROESBECK Telephone No. 3699462  
(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
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1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>W.M.G. OIL INC.</b>		6. State Oil & Gas Lease No. <b>K-4104</b>
3. Address of Operator <b>P.O. BOX 162 TATUM N.M. 88267</b>		7. Lease Name or Unit Agreement Name: <b>STATE K</b>
4. Well Location Unit Letter <b>C</b> : <b>660</b> feet from the <b>SOUTH</b> line and <b>1980</b> feet from the <b>EAST</b> line Section <b>2</b> Township <b>10-S</b> Range <b>33-E</b> NMPM County <b>LEA</b>		8. Well No. <b>1</b>
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TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER: <input type="checkbox"/>
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