State of New Mexico Form C-103 Submit 3 Copies Energy, Minerals and Natural Resources Department to Appropriate District Office Revised 1-1-89 OIL CONSERVATION DIVISION DISTRICT WELL API NO. P.O. Box 1980, Hobbs, NM \$8240 2040 Pacheco St. 30-025-31250 Santa Fe. NM 87505 DISTRICT II 5. Indicate Type of Lease P.O. Drawer DD, Ariesia, NM 88210 STATERY FEE [DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. 23245 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: WELL WELL OTHER SWD STATE SWD 8. Well No. 2. Name of Operator COBRA OIL & GAS CORPORATION 9. Pool name or Wildcat 3. Address of Operator SAN ANDRES -- SWD P 0 BOX 8206; WICHITA FALLS, TX 76307-8206 Well Location 1650 __ Feet From The ___SOUTH 2150 Line and Feet From The ___ -16 **NMPM** LEA 37E County Range Township 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3992 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. TEMPORARILY ABANDON **CHANGE PLANS** CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: 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. 05/10/02: NOTIFY OCD--MIRU MAYO MARRS CASING PULLIN INC., POOH WITH TUBING AND 8-5/8" PACKER, RIH AND SET 35 SACKS CEMENT PLUG AT 4,273 FEET, SHUT IN WELL. 05/13/02: RIH AND TAG TOP OF PLUG AT 4,161 FEET, CIRCULATE 10# MUD, SPOT 30 SACKS CEMENT PLUG FROM 2,000 FEET TO 1,900 FEET, SPOT 35 SACKS CEMENT PLUG AT 471 FEET, WAIT ON CEMENT, RIGH AND TAG AT 360 FEET, SPOT 10 SACKS CEMENT PLUG AT 60 FEET TO SURFACE, RDMO, INSTALL DRY HOLE MARKER, LEVEL PIT AND CECLAR.

se and complete to the best of my knowledge and belief. I hereby certify that the information abo PRODUCTION SUPERVISOR 05-29-02 SKINATURE **ТЕГЕРНОМЕ NO. 940-716-5100** RORY EDWARDS TYPE OR PRINT NAME (This space for State Use) AUG 0 7 2002 COMPLIANCE OFFICER

CONDITIONS OF APPROVAL, IF ANY

APPROVED BY