

Submit 3 Copies  
to Appropriate  
District Office

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

2040 Pacheco St.  
Santa Fe, NM 87505

Form C-103  
Revised 1-1-89

WELL API NO.

30-025-33721

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

STATE 3

8. Well No.

1

9. Pool name or Wildcat

SOUTH CROSSROADS-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 DRY HOLE

2. Name of Operator

COBRA OIL & GAS CORPORATION

3. Address of Operator

P O BOX 8206, WICHITA FALLS, TX 76307-8206

4. Well Location

Unit Letter F : 2310 Feet From The NORTH Line and 1650 Feet From The WEST Line

Section 3

Township 10 S

Range 36 E

NMPM

LEA

County

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

4021.3 GR

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.

SET 35 SACK CLASS "C" CEMENT PLUG FROM 2200'-2100'. - T. D. S.  
SET 35 SACK CLASS "C" CEMENT PLUG FROM 550'-450'. F/490-390' TAG  
SET 10 SACK CLASS "C" CEMENT PLUG FROM 30' TO SURFACE.  
INSTALL DRY HOLE MARKER, RESTORE LOCATION.

THE COMMISSION MUST BE NOTIFIED 24  
HOURS PRIOR TO THE BEGINNING OF  
PLUGGING OPERATIONS FOR THE C-103  
TO BE APPROVED.

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

SIGNATURE

RORY EDWARDS

PRODUCTION SUPERVISOR

DATE 08/23/01

TYPE OR PRINT NAME

TELEPHONE NO. 940/716-5101

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: