| Submit 3 Copies To Appropriate District Office  | State of New Mexico                    |                       | Form C-103                             |                                     |  |
|---|--|-----------------------|--|-------------------------------------|--|
| District I  | Energy, Minerals and Natural Resources |                       |  | Revised March 25, 1999 WELL API NO. |  |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II  | OXI GONGEDIA MI                        |                       | 30025-35597                            |                                     |  |
| 811 South First, Artesia, NM 88210  | OIL CONSERVATION DIVISION              |                       | 5. Indicate Type                       | of Lease                            |  |
| District III<br>1000 Rio Brazos Rd., Aztec, NM 87410  | 2040 South Pacheco                     |                       | STATE                                  | Z FEE □                             |  |
| istrict IV<br>940 South Pacheco, Santa Fe, NM 87505   |  |                       | Gas Lease No.                          |                                     |  |
|   | AND DEDODTE ON WEI                     | IC                    | V4674                                  | r Unit Agreement Name:              |  |
| 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 o                        | Tomic Agreement Name.               |  |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH   |  |                       | Sundown State                          |                                     |  |
| PROPOSALS.)  1. Type of Well:   |  |                       |  |                                     |  |
| Oil Well Gas Well   | Other Injection                        | on                    |  |                                     |  |
| 2. Name of Operator   |  |                       | 7. Well No.                            | 2                                   |  |
| Concho Oil & Gas Corp.  3. Address of Operator  |  |                       | 8. Pool name or                        | r Wildcat                           |  |
| 110 W. Louisiana Ste 410; Midland, Tx 79701   |  |                       | Undes. San Andre                       |                                     |  |
| 4. Well Location  |  |                       |  |                                     |  |
|   |  | 1: 1 ((0 f)           | C 41                                   |                                     |  |
| Unit Letter M: 660 Fe   | et from the South                      | line and 660 feet     | from theWes                            | st line                             |  |
| Section 14  | Township 10S                           | Range 37E             | NMPM                                   | Lea County                          |  |
| 10  | O. Elevation (Show whether             | DR, RKB, RT, GR, etc. | z.)                                    |                                     |  |
| 3940 GL  11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |  |                       |  |                                     |  |
| NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  |  |                       |  |                                     |  |
|   | LUG AND ABANDON                        | REMEDIAL WOR          |  | ALTERING CASING                     |  |
|   |  | 0014151105 55         |  | DI LIGANID                          |  |
| TEMPORARILY ABANDON   C   | HANGE PLANS                            | COMMENCE DRI          | LLING OPNS. [_]                        | PLUG AND ABANDONMENT                |  |
| ,   | ULTIPLE                                | CASING TEST AI        | ND 🗆                                   |                                     |  |
| C   | OMPLETION \ /                          | CEMENT JOB            |  |                                     |  |
| OTHER: spud well/set csg  | <b>X</b>                               | 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. |  |                       |  |                                     |  |
| or recompnation.  |  |                       |  |                                     |  |
| 12-10-01 Spud well @ 10:30 P  | PM.                                    |                       |  |                                     |  |
| 12-11-01 RIH w/ 8-3/8", 24#, J55 ST&C csg & set @ 388'. Cmt w/ 250 sx 'C' + 2% CaCl + 1#/sx Flocele. Circ 70 sx to                        |  |                       |  |                                     |  |
| surface. WOC 12 hr  | rs.                                    |                       |  | 0212222                             |  |
|   |  |                       | (ch <sup>0</sup> )                     | 05 54.54                            |  |
|   |  |                       | /ARC                                   | 1997                                |  |
|   |  |                       | 1615767                                | 10 m                                |  |
|   |  |                       |  | Upp "ED (2)                         |  |
|   |  |                       | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \  | Kr yobbs                            |  |
| 1   | 0                                      |                       | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | , 000                               |  |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.                                  |  |                       |  |                                     |  |
| SIGNATURE   | XXX TITL                               | E Production Ana      | lyst DATE                              | 12-13-01                            |  |
| SIGNATURE   | THE THE                                | L Troduction Ama      | <u>yst</u> DTTL                        | 12 13 01                            |  |
| Type or print name Terri Stathem Telephone No. 915/683-7443   |  |                       |  |                                     |  |
| (This space for State use)  |  | Omagan el             | 2017Z                                  |                                     |  |
| APPPROVED BY  | TITLI                                  | FAULT. F              | FRANKELA                               | DATE                                |  |
| Conditions of approval, if any:   |  | PEHOLEUM              | T                                      |                                     |  |