|   |                                 | ····-                                 | _                             |   |
|---|---------------------------------|---------------------------------------|-------------------------------|---|
| NO. OF COPIES RECEIVED                  |                                 | -                                     |                               | Form C-103<br>Supersedes Old              |
| DISTRIBUTION                            |                                 |                                       |                               | C-102 and C-103                           |
| SANTA FE                                |                                 | NEW MEXICO OIL CONSI                  | ERVATION COMMISSION           | Effective 1-1-65                          |
| FILE                                    |                                 |                                       |                               | 5a. Indicate Type of Lease                |
| U.S.G.S.                                |                                 |                                       |                               | State Fee X                               |
| LAND OFFICE                             |                                 |                                       |                               | 5. State Oil & Gas Lease No.              |
| OPERATOR                                |                                 | J                                     |                               |   |
|   |                                 | · · · · · · · · · · · · · · · · · · · |                               | LC 062178                                 |
| (DO NOT USE THIS FOR                    |                                 |                                       |                               |   |
| 1.                                      |                                 |                                       |                               | 7. Unit Agreement Name                    |
| OIL GAS<br>WELL WELL                    | Milnesand Unit                  |                                       |                               |   |
| 2. Name of Operator                     | 8. Farm or Lease Name           |                                       |                               |   |
| Breck Operating                         | Corp.                           |                                       |                               |   |
| 3. Address of Operator                  | 9. Well No.                     |                                       |                               |   |
| P.O. Box 911, B:                        | 112                             |                                       |                               |   |
| 4. Location of Well                     | 10. Field and Pool, or Wildcart |                                       |                               |   |
| Н                                       |                                 | 1980 FEET FROM THE North              | LINE AND FEET FROM            | Milnesand (San Andres)                    |
|   |                                 |                                       |                               |   |
| East                                    |                                 | ION12 TOWNSHIP8-S                     | BANGE 34-E                    |   |
|   | INC, SECT                       |                                       |                               | VIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII    |
|   | $\overline{\Pi}$                | 15. Elevation (Show whether           | $\overline{DF, RT, GR, etc.}$ | 12. County                                |
| /////////////////////////////////////// | /////                           | 4256.7 GR                             |                               | Roosevelt AllIIIII                        |
| 16.                                     | Check                           | Appropriate Box To Indicate N         | ature of Notice, Report or Ot | her Data                                  |
|   |                                 | NTENTION TO:                          | SUBSEQUEN                     | T REPORT OF:                              |
|   |                                 |                                       |                               |   |
| PERFORM REMEDIAL WORK                   | 7                               | PLUG AND ABANDON                      | REMEDIAL WORK                 | ALTERING CASING                           |
| TEMPORARILY ABANDON                     | า                               |                                       | COMMENCE DRILLING OPNS.       | PLUG AND ABANDONMENT                      |
| PULL OR ALTER CASING                    | 1                               | CHANGE PLANS                          | CASING TEST AND CEMENT JOB    |   |
|   | -                               |                                       | OTHER                         |   |
| OTHER                                   |                                 |                                       |                               |   |
| ÷. 11511                                |                                 |                                       | L                             | a estimated date of starting any proposed |
|   |                                 |                                       |                               |   |

17. 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.

The above mentioned well is plugged and abandoned, and the wellsite is ready for final inspection. The plugs were placed as follows:

CIBP @ 4575' w/10 sx on top-CIBP tagged
60 sx 448-220'-4<sup>1</sup>/<sub>2</sub>" casing shot @ 402' and pulled. Top of plug tagged.
10 sx 30-3'-Cement circulated. Cut 8 5/8" 3' below surface and welded on steel plate.

Holes loaded with brine and salt gel.

| 18. I hereby certify that the information above is true and complet | e to the best of my knowledge and belief. |
|---|---|
| Kerrin C. Duncan  | TITLE Petroleum Engineer 5-11-87          |
| APPROVED BY ALIK AYUS   | OIL & GAS INSPECTOR DATE JUL 8 1987       |
| CONDITIONS OF APPROVAL, IF ANY:                                     |   |



 $\frac{\lambda_{i}}{2} = \frac{1}{2} \frac{1}{2$