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State of New Mexico

Fred Darrier

Form C.103 to Appropriate District Office Energy, Minerals and Natural Resources Department Revised 1-1-89 OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 DISTRICTI Santa Fe. New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease FEE X STATE DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 6. State Oil & Gas Lease No. LC 062178 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 Weil: Milnesand Unit WELL X VELL. OTHERS. 2. Name of Operator 8. Well No. Breck Operating Corp. 114 3. Address of Operator 9. Pool name or Wildcat P.O. Box 911, Breckenridge, TX 76024 Milnesand (San Andres) Well Location Line and _1651 990 Feet From The North East Unit Letter _ Feet From The Line 34E Range Roosevelt Township **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4249' (GR) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER: Temporarily Abandoned X 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. Breck Operating Corp. requests permission to set a 4-1/2" CIBP with 3 sx (35') of cement on top in the subject well. The CIBP will be set at 4550' above the perforations from 4609-4644' casing will be pressure tested for temporary abandonment at a later date. I hereby certify that the information above is true and complete to the best of my knowledge and belief. $\mathcal{U}(a)$ me Petroleum Engineer pare 5-10-91 Dunćan

TELEPHONE NO. TYPE OR PRINT NAME (This space for State Use) APPROVED BY -