| Submit 3 Copies<br>to Appropriate<br>District Office  | State of New Mex.<br>Energy, i stats and Natural Rese |                                      | Form C-103<br>Revised 1-1-89                                 |  |
|---|---|--------------------------------------|--|--|
| DISTRICT I<br>P.O. Box 1980, Hobbs, NM 88240  | OIL CONSERVATION<br>P.O. Box 2088                     | WELL API NO.                         |  |  |
| DISTRICT II<br>P.O. Drawer DD, Artesia, NM 88210  | Santa Fe, New Mexico 8                                | 7504-2088 5. Indicate Type of        | Lease<br>STATE L FEE   |  |
| DISIRICT III<br>1000 Rio Brazos Rd., Aztec, NM 87410  |   | 6. State Oil & Gas                   | Lease No.<br>0C-1395   |  |
| SUNDRY NOTICES AND REPORTS ON WELLS<br>( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"<br>(FORM C-101) FOR SUCH PROPOSALS.) |   | PR PLUG BACK TO A 7. Lease Name or U | 7. Lease Name or Unit Agreement Name<br>– Todd Lower SA Unit |  |
| 1. Type of Well:<br>OIL<br>WELL XX WELL   | OTHER   | Section 35                           |  |  |
| 2. Name of Operator<br>MUDDHV ODEDA   | TING CORPORATION                                      | 8. Well No. 9                        |  |  |
| 3. Address of Operator  | 2648, Roswell, NM 88202-                              |                                      | 9. Pool name or Wildcat<br>Todd Lower SA Unit Assoc.         |  |
| 4. Well Location<br>Unit Letter :660  | Feet From The East                                    | Line and 1980' Feet From             | The South Line   |  |
| Section 35  | Township 7S Rang<br>10. Elevation (Show whether D     |                                      | elt County   |  |
|   | 11 1  | ature of Notice, Report, or Other    |  |  |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:   |   |                                      | EPORT OF:  |  |
|   |   |                                      |  |  |
|   | CHANGE PLANS  |                                      |  |  |
| PULL OR ALTER CASING  |   | CASING TEST AND CEMENT JOB           |  |  |
| OTHER:Temporari   | ly Abandon X  | OTHER:                               |  |  |

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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.

| TELEPHONE NO.   |
|-----------------|
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| AHQ 4 4 1000    |
| DATE AUD 1 1909 |
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