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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

SEP 21 11 47 AM '67

| | |
|-------------------------------------------|------------------------------|
| 5a. Indicate Type of Lease | |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |

| |
|------------------------------|
| 5. State Oil & Gas Lease No. |
| B 10706 |

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/> |
| 2. Name of Operator Sam Boren |
| 3. Address of Operator Box 953, Midland, Texas |
| 4. Location of Well UNIT LETTER N , 660 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 25 TOWNSHIP 12S RANGE 33E NMPM. |

| |
|----------------------------------------------------------------|
| 7. Unit Agreement Name N |
| 8. Farm or Lease Name Anerada-State |
| 9. Well No. 1 |
| 10. Field and Pool, or Wildcat East Hightower Lower Permian |

| |
|----------------------------------------------------------|
| 15. Elevation (Show whether DF, RT, GR, etc.) 4226 GL |
|----------------------------------------------------------|

| |
|-------------------|
| 12. County Lea |
|-------------------|

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

| | |
|------------------------------------------------|-------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | OTHER <input type="checkbox"/> |

SUBSEQUENT REPORT OF:

| | |
|----------------------------------------------------------------|-----------------------------------------------|
| REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> | OTHER <input type="checkbox"/> |

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.

Well spudded 7/23/67. 11 3/4", 40#, IL-40, surface casing set at 414' and cemented with 400 sacks. Cement allowed to set 24 hrs. before testing with 1000# pressure for 30 minutes with no drop.

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

SIGNED Ernest Smith TITLE Agent DATE 9/26/67

APPROVED BY [Signature] TITLE Agent DATE 9/26/67

CONDITIONS OF APPROVAL, IF ANY: