| NO. OF COPIES RECEIVED  |                               |                                       | Form C-103                          |
|---|-------------------------------|---------------------------------------|-------------------------------------|
| DISTRIBUTION  | 1                             |                                       | Supersedes Old                      |
| SANTA FE  | NEW MEXICO OIL CONS           | FRVATION COMMISSION                   | C-102 and C-103<br>Effective 1-1-65 |
| FILE  |                               |                                       | Ellective 1-1-00                    |
| U.S.G.S.  | 1                             | : · · · ·                             | 5a. Indicate Type of Lease          |
|   | 1                             |                                       | State X Fee                         |
| OPERATOR  | -                             |                                       | 5. State Oil & Gas Lease No.        |
|   | -                             |                                       | K 3338                              |
| (DO NOT USE THIS FORM FOR PR<br>USE "APPLICA                    |                               |                                       |                                     |
| 1.  |                               | · · · · · · · · · · · · · · · · · · · | 7. Unit Agreement Name              |
| OIL GAS WELL  | OTHER- See below              |                                       |                                     |
| 2. Name of Operator   |                               |                                       | 8. Farm or Lease Name               |
| Robert B. Holt  |                               |                                       | Aztec State                         |
| 3. Address of Operator  |                               |                                       | 9. Well No.                         |
| 801 Midland Nat!  | 1 Bank Bldg., Midland, Te     | exas 79701                            | 1                                   |
| 4. Location of Well   |                               |                                       | 10. Field and Pool, or Wildcat      |
| UNIT LETTER H . 1980 FEET FROM THE North LINE AND 660 FEET FROM |                               |                                       | Baum Wolfcamp                       |
| UNIT LETTER   |                               | LINE AND FEET FRO                     |                                     |
| Eact  | ION 25 TOWNSHIP 13S           | 32E                                   |                                     |
| THELINE, SECT   | ION TOWNSHIP                  | RANGE NMPN                            | , <del>ΥΠΠΗΠΗΠΗΠΗΠΗΠΗ</del>         |
|   | 15. Elevation (Show whether   | DF. RT. GR. etc.)                     | 12. County                          |
| $\boldsymbol{\nabla}$   |                               |                                       | Lea                                 |
|   |                               |                                       |                                     |
|   | Appropriate Box To Indicate N | ature of Notice, Report or O          | ther Data                           |
| NOTICE OF I   | NTENTION TO:                  | SUBSEQUEN                             | IT REPORT OF:                       |
| <b>F_1</b>  |                               |                                       |                                     |
| PERFORM REMEDIAL WORK   | PLUG AND ABANDON              |                                       | ALTERING CASING                     |
| TEMPORARILY ABANDON   |                               | COMMENCE DRILLING OPNS.               | PLUG AND ABANDONMENT                |
| PULL OR ALTER CASING  | CHANGE PLANS                  | CASING TEST AND CEMENT JOB            | <u> </u>                            |
|   |                               | OTHER                                 |                                     |
| OTHER   |                               |                                       |                                     |
|   |                               |                                       |                                     |

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 orginally completed in the Bough C, producing intervals 9789-9798'. Perforated Wolfcamp with 2500 Gal. acid. Set Baker DR plug with Model D packer @ 9753 with 2 sx. cement. Plug Back depth 9740. Well tested from 2-21-69 to 2-28-69 with no show of oil or gas and 1100 barrels of water per day.

Applying for a hearing to convert wall to water injection well.

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

| signed Station forder |       | 4-11-69       |
|-----------------------|-------|---------------|
| APPROVED BY           | TITLE | Al IN IN 1969 |