

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

DISTRICT 2
P.O. Drawer DD, Artesia, NM 88210

DISTRICT 3
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-01438
5. Indicate Type of Lease	
6. State Oil & Gas Lease No.	State B-2148
7. Lease Name or Unit Agreement Name	Shahara State Unit
8. Well No.	8
9. Pool name or Wildcat	Maljamar Grayburg San Andres

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator Shahara Oil, LLC	
3. Address of Operator 207 W. McKay, Carlsbad, NM 88220 505/885-5433	
4. Well Location Unit Letter <u>M</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>16</u> Township <u>17S</u> Range <u>33</u> NMPM <u>Lea</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <u>Conversion to injector</u> <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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.

05/24/00 Installed BOP. Tagged fill @ 4360'. Drilled & circulated clean to 4430'. Set 5 1/2" 15.5# tension pkr @ 4030'.

05/24/00 Acidized open hole from 4120' to 4430' w/2500 gal 15% NEFE acid pumped in @ 3 1/2 BPM @ 2550 psi.

05/26/00 RIH w/5 1/2" 15.5# AD-1 plastic coated tension pkr, 127 jts of new 2 3/8" plastic coated (TK-70) injection tbg. Circulated pkr fluid & set pkr @ 4015'. Tested annulus to 310 psi for 30 min - held good.

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

SIGNATURE Thallia Marshall TITLE Agent DATE 05/31/00

TYPE OR PRINT NAME Thallia Marshall TELEPHONE NO. 505-885-5433

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY: _____

ORIGINAL SIGNED BY _____

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