Submit 3 Copies to Appropriate District Office

State of New Mexico Finergy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-8

Revised	1-1-

DISTRICT I P.O. Box 1980, Hobbs, NM \$2240 DISTRICT II P.O. Drawer DD, Artesia, NM \$2210 DISTRICT III 1000 Rio Brazos Rd., Azzec, NM \$7410 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.)		WELL API NO. 30-025-05250 5. Indicate Type of Lease STATE X FEE 6. State Oil & Ges Lease No. B-8944 7. Lease Name or Unit Agreement Name MEXICO "F"				
				1. Type of Well:		
				OIL OTHER 2. Name of Operator		0.70
				Crestridge Drilling & Production Company	, LLC	8. Well No. 5
3. Address of Opentor P.O. Box 1114 Midland, Texas 79702		9. Pool same or Wildcat DENTON DEVONIAN				
4. Well Location Unit Letter B: 660 Feet From The Nort	h Line and 198	Feet From The East Line				
Section 2 Township 15S	Range 37E	NMPM Lea County				
	whether DF, RKB, RT, GR, etc.)	VIIIIIIII				
	3813 DF					
11. Check Appropriate Box to Ind NOTICE OF INTENTION TO:						
	501	BSEQUENT REPORT OF:				
PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING				
TEMPORARILY ABANDON X CHANGE PLANS	COMMENCE DRILLIN	NG OPNS. PLUG AND ABANDONMENT				
PULL OR ALTER CASING	CASING TEST AND C	CEMENTJOB 🔲				
OTHER:	OTHER:					
12. Describe Proposed or Completed Operations (Clearly state all pertinent	details, and give persinent dates, in	actualing estimated date of starting any proposed				
work) SEE RULE 1103.						
 (1) Notify Oil Conservation Division 2 (2) Rig Up well service unit and pull (3) Run in hole with retrievable bridg 	out of hole 2 7/8"					
to 500 PSI.		1				
(4) Pull out of hole with retrievable permanent bridge plug and set at 1		eker, run back in noie with				
(5) Test Casing to 500 PSI for 30 minu	tes with no more th					
(6) Circulate wellbore and pull out an(7) Submit to Oil Conservation Divisio						
(/) Submit to OII Conservation Divisio	n report of tempora					
I hereby certify that the infiguration subsyll is true and complete to the best of my knowled	dge and belief.					
SIGNATURE XX /// // //	mueManager	DATE 10-26-01				
TYPEOR PROTINAME R.A. (Rick)McBride Jr.		TELEPHONE NO. 915-685-7071				
(This spece for State Use)						