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 I
P.O. Box 1980, Hobbs, NM 88240

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

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

OIL CONSERVATION DIVISION
2040 Pacheco St.
Santa Fe, NM 87505

Amended

WELL API NO. 30-025-05262

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name: Argo

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER

8. Well No. 1

2. Name of Operator: Polaris Production Corp

9. Pool name or Wildcat: Denton Wolfcamp

3. Address of Operator: 415 W. Wall, Suite 2010 Midland TX. 79701

4. Well Location
Unit Letter A : 660 Feet From The N Line and 660 Feet From The E Line
Section 3 Township 15-S Range 37E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☒	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER:	☐			OTHER:			☐

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.

Set CIBP @ 8000' - 35' cmt on top
Cir. 9.5# mud
Install dry hole marker
Pull casing @ 5500+-
Spot 45 sxs @ stub & tag
Spot 50 sxs @ 4705-4605 & tag
Spot 35 sxs @ top of salt 2210-2110
Spot 35 sxs @ 425-325
Spot 10 sxs @ 30' - surface

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS. NOTIFICATION TO BE APPROVED.

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

SIGNATURE [signature] TITLE Agent DATE 10-20-97

TYPE OR PRINT NAME Ricky Smith TELEPHONE NO. 915 686-3076

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY CHRIS WILLIAMS DISTRICT I SUPERVISOR TITLE DATE OCT 17 1997

CONDITIONS OF APPROVAL, IF ANY: