

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Enr 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
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-27575
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. 06-4765
7. Lease Name or Unit Agreement Name Aztec St. Com
8. Well No. 3
9. Pool name or Wildcat SWD Undergoated / Wolfcamp

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 ☒ GAS WELL ☐ OTHER SWD	
2. Name of Operator SMITH & MARAS INC.	
3. Address of Operator Box 863 Kermit, TX. 79745	
4. Well Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line Section 18 Township 16 S Range 37 E NMPM LEA County	
10. Elevation (Show whether DF, RKD, RF, GR, etc.) 3844' M.L.	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	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.

1. Set CIBP @ 10,000' - 35' cmt on top TAG
2. Spnt 25 sxs @ 7,200' - 7,100'
3. Pull 5 1/2 @ Freeport
4. 40 sxs @ 50' in & 50' out stub & TAG
5. 40 sxs @ 4253' - 4153' & TAG
6. 35 sxs @ 2200' - 2100'
7. 35 sxs @ 492' - 392' TAG
8. 10 sxs @ 30' - surface

THE COMPLETION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING AND CEMENTING TO BE DONE.

Install Dry Hole Marker - Cir. 9.5" MUD

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

SIGNATURE **[Signature]** TITLE **Pres** DATE **10-29-01**

TYPE OR PRINT NAME **Rickey Smith** TELEPHONE NO. **915 586-3076**

(This space for State Use)

APPROVED BY _____ TITLE _____ ORIGINAL SIGNED BY _____ DATE **NOV 06 2001**

CONDITIONS OF APPROVAL, IF ANY: _____ GARY W. WINK NATURAL SCIENCE MANAGER -2

JC

dm