

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

Form C-103  
Revised March 25, 1999

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. <b>30-025-33090</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Water Injection Well		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>Stephens &amp; Johnson Operating Co.</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>P O Box 2249, Wichita Falls, TX 76307-2249</b>		7. Lease Name or Unit Agreement Name: <b>Denton North Wolfcamp Unit Agreement 8919987370</b>
4. Well Location Unit Letter <b>G</b> : <b>1458</b> feet from the <b>North</b> line and <b>1347</b> feet from the <b>East</b> line Section <b>35</b> Township <b>14S</b> Range <b>37E</b> NMPM County <b>Lea</b>		8. Well No. <b>Tr 6 No. 633</b>
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. Pool name or Wildcat <b>Denton Wolfcamp</b>

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <b>MIT for injection</b> <input checked="" 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

11-18-00 Run MIT for well. Pressure test casing to 560 psi. Test - OK.  
Started injection into well.

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

SIGNATURE Bob Gilmore TITLE Petroleum Engineer DATE 6-28-01

Type or print name Bob Gilmore Telephone No. (940) 723-2166  
(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE PAUL E. KATZ DATE 2001  
Conditions of approval, if any:

105N