

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 88210  
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

Form C-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

WELL API NO. <b>30-025-34931</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <b>Penju</b>
8. Well No. <b># 1</b>
9. Pool name or Wildcat <b>Lovington Penn NE</b>

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
**GR: 3894' KB: 3911'**

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 <b>P&amp;A</b>
2. Name of Operator <b>TREND EXPLORATION I, LLC</b>
3. Address of Operator <b>500 N. Loraine, Suite 1130, Midland, Tx. 79705</b>
4. Well Location Unit Letter <b>10</b> : <b>4135</b> Feet From The <b>South</b> Line and <b>2318</b> Feet From The <b>East</b> Line Section <b>2</b> Township <b>16 S</b> Range <b>36 E</b> NMPM County <b>Lea</b>

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

Spud on 4/8/00 @ 10:00am  
Surface Casing 4/9/00  
Size: 12-3/4"  
Depth: 457'  
490 sx Class C  
WOC: 7 hours

Intermed Casing 4/19/00  
Size: 8-5/8"  
Depth: 4,733'  
1340 sx Class C Neat  
WOC: 6 hours

Plugged on 5/16/00 Cement Plugs		
1 <sup>st</sup>	11,000'	25sx
2 <sup>nd</sup>	9,000'	25sx
3 <sup>rd</sup>	7,000'	25sx
4 <sup>th</sup>	4,650'	25sx
5 <sup>th</sup>	3,310'	25sx
6 <sup>th</sup>	2,050'	25sx
7 <sup>th</sup>	Top	15sx

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

SIGNATURE  TITLE **CONSULTANT** DATE **07/24/00 (re-submitted)**

Type or print name **GREG KLEIN** Telephone No. **505-466-8120**  
(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of approval, if any:

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C

N