State of New Mexico Form C-103 Submit 3 Copies To Appropriate District Minerals and Natural Resources Ener: Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-01542 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III STATE **x** FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 B-2516 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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.) SEMGSAU 1. Type of Well: Gas Well Oil Well Other wiw 8. Well No. 2. Name of Operator Cross Timbers Operating Company 9. Pool name or Wildcat 3. Address of Operator Maljamar Grayburg San Andres 3000 N. Garfield, Suite 175 Midland, Texas 79705 4. Well Location 660 feet from the South line and_ Unit Letter __ feet from the line **NMPM** County Section 29 Township 17S Range 33E 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4050' RKB 11. Check Appropriate Box to Indicate, Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING** CHANGE PLANS COMMENCE DRILLING OPNS. **PLUG AND** TEMPORARILY ABANDON **ABANDONMENT** CASING TEST AND MULTIPLE PULL OR ALTER CASING COMPLETION CEMENT JOB \mathbf{x} OTHER: Returned well to active injection status 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. Received letter dated 10/24/2000 from David Catanach that well could be returned to active status. Well returned to active status 10/28/2000 at rate of 211 BWPD on vac. I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Operations Engineer SIGNATURE. DATE -Type or print hame Janice Courtney Telephone No. 915/682-8873 (This space for State use) APPROVED BY_ TITLE DATE Conditions of approval, if any: Original Control Raul Krais

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