

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

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

WELL API NO.  
30-025-27643

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Williams

8. Well No. 2

9. Pool name or Wildcat  
E. Bishop Canyon San Andres

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

2. Name of Operator  
AVRA OIL COMPANY

3. Address of Operator  
P.O. BOX 3193, MIDLAND, TEXAS 79702

4. Well Location  
Unit Letter H : 2310 Feet From The North Line and 560 Feet From The East Line  
Section 11 Township 18S Range 38E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3652 K.B.

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: Plug Back ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ 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.

We intent to test the Queen Zone @ 4100', since the San Andres is uneconomical. We will set B.P. @ 4300' PEA Queen Formating from 4090'-4100', Acidize and based on SWAB Test, may Sand Frac the Queen.

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

SIGNATURE Saeed Afghahi TITLE President

DATE 9/16/98

TYPE OR PRINT NAME Saeed Afghahi

TELEPHONE NO. (915)682-4866

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS  
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

SEP 25 1998

CONDITIONS OF APPROVAL, IF ANY:

approved for testing queen only, if productive  
must submit CIOI for plugging back. Standard location