

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

|   |              |
|---|--------------|
| WELL API NO.  | 30-025-35670 |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |              |
| 6. State Oil & Gas Lease No.<br>25697   |              |
| 7. Lease Name or Unit Agreement Name<br>W.D. Grimes (NCT-A)   |              |
| 8. Well No. 25  |              |
| 9. Pool name or Wildcat<br>Hobbs: Upper Blinbry   |              |
| 10. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3640'   |              |

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 Injection

2. Name of Operator  
Texland Petroleum - Hobbs, L.L.C

3. Address of Operator  
777 Main Street, Ste. 3200 Fort Worth Tx 76102

4. Well Location

Unit Letter C : 140 feet from the North line and 2550 feet from the West line

Section 32 Township 18S Range 38E NMPM County Lea

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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOBS ☐

OTHER: Pressure test for completion ☒

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.

PRESSURE TEST: Casing 650 psig 30 minutes.

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

SIGNATURE Ann Burdette TITLE Regulatory Analyst DATE 12-3-01

Type or print name Ann Burdette

Telephone No. (817)336-2751

(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE AUG 21 2002

Conditions of approval, if any:

ORIGINAL SIGNED BY  
PAUL F. KAUTZ  
PETROLEUM ENGINEER

