Form C-103 Submit 3 Copies to Appropriate State of New Mexico Energy Minerals and Natural Resources Revised March 25, 1999 District Office DISTRICT I WELL API NO. 1625 n. French Dr., Hobbs, NM 88240 OIL CONSERVATION DIVISION DISTRICT II 30-025-35788 811 South First, Artesia, NM 88210 Indicate Type of Lease 2040 South Pacheco STATE FEE DISTRICT III Santa Fe, NM 87505 1000 Rio Brazos Rd., Aztec, NM 87410 State Oil & Gas Lease No DISTRICT IV 2040 S. Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 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) Toro 21 Type of Well: Gas Well Oil Well Other IX Well No. Name of Operator 2 Louis Dreyfus Natural Gas Corp. 9. Pool name or Wildcat Address of Operator Scharb; Wolfcamp, SE 14000 Quail Springs Parkway - Suite 600 - Oklahoma City, OK 73134 Well Location 2310' South line and 2310' feet from the line. Unit letter feet from the 35E Lea County Township **19S** Range NMPM Section 10. Elevation (Show whether DR, RKB, RT, Gr, etc.) 3758' 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON COMMENCE DRILLING OPNS. **PLUG AND TEMPORARILY ABANDON** CHANGE PLANS **ABANDONMENT** CASING TEST AND CEMENT JOB X **PULL OR ALTER CASING MULTIPLE** COMPLETION OTHER: OTHER: 12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propropsed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. 1/22/02 ran 5 1/2", 17#, P-110 & N-80 csg., set @ 11,200'. Cemented w/850 sx TXI Lightweight, bumped plug, float held, estimated TOC @ 7,000'. WOCU. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Regulatory Technician

TITLE

ORIĞINAL SIĞNED BY PAUL F. KAUTZ 01/29/02

FEB 0 4 2002

DATE

DATE

Telephone No.

405-749-5263

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Type or print name

APPROVED BY

(This space for State use)

Conditions of approval, if any:

Carla Christian