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
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-025-06005

sIndicate Type of Lease

STATE ☐ FEE ☒

6State Oil & Gas Lease No.

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.)

7Lease Name or Unit Agreement Name
Britt Laughlin

1Type of Well:
OIL WELL ☐   GAS WELL ☒   OTHER

2Name of Operator
Doyle Hartman

8Well No.
4

3Address of Operator
500 N. Main, Midland, Tx 79701

9Pool name or Wildcat
Eumont

4Well Location

Unit Letter __A__ : __660__ Feet From The _____North_____ Line and ___660___ Feet From The _____East_____ Line

8 Section   20S Township   37E Range   NMPM   Lea County

10Elevation (*Show whether DF, RKB, RT, GR, etc.*)

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: _____ ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐   ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐   PLUG AND ANBANDONMENT ☐

CASING TEST ~~AND CEMENT JOB~~ ☒

OTHER: _____ ☐

12Describe Proposed or Completed Operations (*Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work*) SEE RULE 1103.

8-15-02 The casing was tested to 600 psi. The test was good and witnessed by Mr. Robinson (NMOCD). We respectfully request continued temporary abandonment status in order to evaluate for possible future use.

This Approval of Temporary
Abandonment Expires ____8/21/07____

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

SIGNATURE _____   TITLE Engineer   DATE 08-16-02

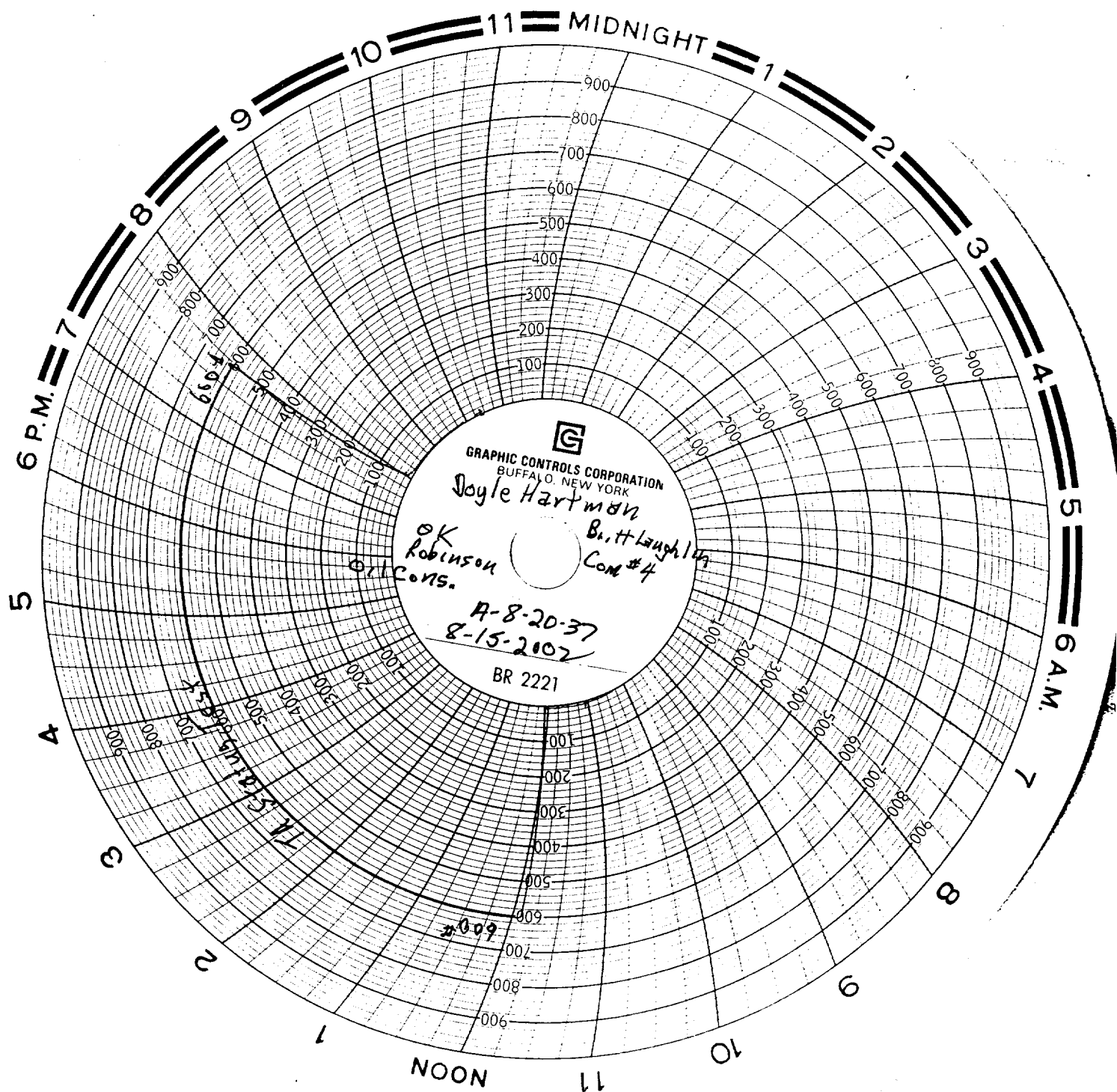TYPE OR PRINT NAME Don Mashburn   TELEPHONE NO. 915-684-4011

(This space for State Use)

ORIGINAL SIGNED BY
GARY W. WINK
OC FIELD REPRESENTATIVE

APPROVED BY _____   TITLE _____   DATE AUG 2 2 2002

CONDITIONS OF APPROVAL, IF ANY: