

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I

P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-34704
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-1618
7. Lease Name or Unit Agreement Name HAT MESA 32 STATE
8. Well No. 1
9. Pool name or Wildcat HAT MESA (DELAWARE)

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator Bass Enterprises Production Co.	
3. Address of Operator P.O. Box 2760 Midland, TX 79702-2760	
4. Well Location Unit Letter <u>D</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line Section <u>32</u> Township <u>20S</u> Range <u>33E</u> NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3605' GR	

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 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.

THE WELL NAME HAS BEEN CHANGED FROM EXXON 32 STATE #1 TO HAT MESA 32 STATE #1.
NO OTHER CHANGES NECESSARY.

1901
24937
30214
30-025-34704

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

SIGNATURE William R. Dannels TITLE DIVISION DRILLING SUPT. DATE 9/28/99

TYPE OR PRINT NAME WILLIAM R. DANIELS TELEPHONE NO. 915-683-2277

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: