Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Revised March 25, 1999 Energy, Minerals and Natural Resources District I WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 District II 30025-35778 OIL CONSERVATION DIVISION 811 South First, Artesia, NM 88210 5. Indicate Type of Lease District III 2040 South Pacheco STATE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS Lease Name or Unit Agreement (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A Name: DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Manzanita Stato 1. Type of Well Oil Well Gas Well Other Well No. 2. Name of Operator Concho Oil & Gas Corp. 3. Address of Operator Pool name or Wildcat 110 W. Louisiana Ste 410; Midland, Tx 79701 Featherstone Bone Spring 4. Well Location Unit Letter D: 660 feet from the North line and 660 feet from the Section Township 20S Range 35E NMPM Lea 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3699' GR 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. TEMPORARILY ABANDON CHANGE PLANS PLUG AND ABANDONMENT **PULL OR ALTER CASING** MULTIPLE CASING TEST AND П COMPLETION CEMENT JOB OTHER: OTHER: Spud/Set Csg 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. Spud well @ 5:00 AM MST. 12/21/01 RIH w/ 13-3/8" csg & set @ 404'. Cmt w/ 160 sx 35/65 Poz C, 2% CaCl, .25 Celloflake, 6% Bentonite followed by 12/23/01 200 sx Cl C w/ 2% CaCl. Circ 80 sx to pit. WOC 12 hrs. I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE Production Analyst DATE 1-2-02 Type or print name Terri \$tathem Telephone No. 915-683-7443 (This space for State use) APPPROVED BY DATE Conditions of approval, if any:

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