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 88240 DISTRICT II | 2040 Pacheco St. Santa Fe, NM 87505 | | WELL API NO. 30-025-03467 5. Indicate Type of Lease | | |
|--|--|---|---|---------------|----------------|
| P.O. Drawer DD, Artesia, NM 88210 | | | ,,,,, | STATE | FEE |
| DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 | | | 6. State Oil & G | as Lease No. | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | Comment of the second | | |
| (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.) | | | 7. Lease Name or Unit Agreement Name | | |
| 1. Type of Well: OIL GAS WELL OTHER | | | State H | | |
| 2. Name of Operator Citation Oil & Gas Corp. | | | 8. Well No. | | |
| 3. Address of Operator | | | 9. Pool name or Wildcat | | |
| 8223 Willow Place South, Suite 250, Houston, Texas 77070-5623 4. Well Location | | | Eumont Yates Seven River Queen | | |
| Unit Letter B : | 660' Feet From The North | Line and 23 | 10' Feet From | n The | East Line |
| Section 13 Township 21 S Range 35 E NMPM Lea County | | | | | |
| | 10. Elevation (Show whether | | | | County |
| 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 | | | | | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLING | | | |
| PULL OR ALTER CASING |] | COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB | | | |
| OTHER: | | OTHER: | | - 6.64 . 4 | 5 7 |
| | d Operations (Clearly state all restaurant desi | ' | | of Status | ⊠ |
| 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. Citation reactivated this well in March, 1993. Monthly C-115's have been submitted since that time. Status should be shown as a producing oil well. | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| I hereby certify that the information above is to | true and complete to the best of my knowledge and be | elief. | | - | |
| SIGNATURE Allega | 1/26/ | TITLE Regulatory | Analyst | DATE | 5-23-97 |
| TYPE OR PRINT NAME | Debra Harris | | | TELEPHONE NO. | (281) 469-9664 |
| (This space for State Use) Or : | g, Signed b y aul. Kaut z | | | | |
| | • | TITLE | | DATE | N 0 4 1997 |
| CONDITIONS OF APPROVAL, IF ANY: | | | | • | |