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State of New Mexico

Form C-103

Energy, Minerals and Natural Resources Department Revised 1-1-89 District Office OIL CONSERVATION DIVISION DISTRICT I WELL API NO. P.O. Box 1980, Hobbs, NM 8824 P.O. Box 2088 30-025-06431 Santa Fe, New Mexico 87504-2088 DISTRICT II 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 FEE XX STATE 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: GAS WELL **CURRY** MET X OTHER Name of Operator 8. Well No. CAMPBELL & HEDRICK 3. Address of Operator 9. Pool name or Wildcat P. O. BOX 401, MIDLAND, TEXAS 79702 EUMONT YATES 7 RIVERS QUEEN 4. Well Location Feet From The __EAST NORTH 3300 660 Unit Letter Feet From The Line and Line 7 37E LEA **NMPM** County Section Township Range 10. Elevation (Show whether DF, RKB, RT, GR, etc.) UNKNOWN Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK CHANGE PLANS COMMENCE DRILLING OPNS PLUG AND ABANDONMENT TEMPORARILY ABANDON CASING TEST AND CEMENT JOB PULL OR ALTER CASING OTHER: 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. 1. Set CIBP at 3500'. 2. Load hole with 10 lb/get mud. Shoot 7" csg off at 725' and spot 100' of cement 625-725'. Spot 10 sacks cement at surface and erect a steel marker as provided by Rules and Regulations. Return location to orginal condition. By copy of this Form the following offset operators are being notified: THE COMMISSION POINT BE NOTHED THE HOURS PROVE TO THE POOL IND TO 1. ARCO Permian Continental AN KIND CHERNOTE FOR THE CHAN Chevron TO SE APPROYED. I hereby certify that the information above as true and complete to the best of my knowledge and belief TELEPHONE NO TYPE OR PRINT NAME (Thu space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS DISTRICT I SUPERVISOR

PPROVED BY -

CONDITIONS OF APPROVAL, IF ANY: