Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Revised March 25, 1999 Energy, Minerals and Natural Resources District I WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 District II 30-025-28990 OIL CONSERVATION DIVISION 811 South First, Artesia, NM 88210 5. Indicate Type of Lease District III 2040 South Pacheco STATE (X) FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 E-2446 7. Lease Name or Unit Agreement Name: 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 Pogo State PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other 2. Name of Operator 8. Well No. Manzano Oil Corporation Address of Operator 9. Pool name or Wildcat P.O. Box 2107, Roswell, NM 88202-2107 Osudo Morrow Well Location Unit Letter K: 1980 feet from the 2310 South feet from the line and line Section 20 Township 21S Range 35E **NMPM** County Lea 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3624.5'GL 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 **TEMPORARILY ABANDON** ☐ CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND **ABANDONMENT** PULL OR ALTER CASING CASING TEST AND COMPLETION CEMENT JOB XOTHER: 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. Set CIBP @ 12,240'. Cap w/30' of cement. Perf Wolfcamp from 11,130-50' 10/18/00 = 20' @ 2 spf = 40 holes. 11,152' - 1 hole; 11,153' - 1 hole; 11,157' - 1 hole; 11,158' - 1 hole = 4 holes. Total 44 holes Acidize w/5000 gal of 20% NEFE + 60 balls. 10/19/00 11:30 a.m. - Make swab run #4 from 10,200' - Rec O BF. 10/25/00 I hereby certify that the information above is true and complete to the best of my knowledge and belief. Engineering Technician TITLE DATE 10/27/00 **SIGNATURE** Allison Hernandez Telephone No. 505/623-1996 Type or print name (This space for State use)

TITLE

CAR LUNG.

TELO POPO

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APPPROVED BY

Conditions of approval, if any:

