| Submit 3 Copies To Appropriate District   | State of New Mexico |                 | Form C-103                            |                         |                      |          |  |  |
|---|---------------------|-----------------|---------------------------------------|-------------------------|----------------------|----------|--|--|
| Office  | Energy, Minerals    |                 |                                       |                         | Revised March 25, 19 | 999      |  |  |
| District I  | Linergy, miniorano  |                 |                                       | WELL API NO.            |                      |          |  |  |
| 1625 N. French Dr., Hobbs, NM 88240   |                     |                 |                                       | 30-025-35024            |                      |          |  |  |
| District II<br>811 South First, Artesia, NM 88210   | OIL CONSER          |                 |                                       | 5. Indicate Type o      | f Lease              |          |  |  |
| District III  | 2040 Se             | outh Pache      | 200                                   | STATE X                 | FEE                  |          |  |  |
| 1000 Rio Brazos Rd., Aztec, NM 87410  | Santa F             | e, NM 875       | 505                                   | 6. State Oil & G        |                      |          |  |  |
| District IV<br>2040 South Pacheco, Santa Fe, NM 87505   |                     |                 |                                       | E01923-0                |                      |          |  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS   |                     |                 | 7. Lease Name or Unit Agreement       |                         |                      |          |  |  |
| SUNDRY NOTIC<br>(DO NOT USE THIS FORM FOR PROPOS  | Name:               | U               |                                       |                         |                      |          |  |  |
| (DO NOT USE THIS FORM FOR PROPOS<br>DIFFERENT DESERVOR USE "APPLIC  |                     |                 |                                       |                         |                      |          |  |  |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH<br>PROPOSALS.)  |                     |                 | Corner Pocket "14" State              |                         |                      |          |  |  |
| 1. Type of Well;  |                     |                 |                                       |                         |                      |          |  |  |
| Oil Well Gas Well   | X Other             |                 |                                       |                         |                      |          |  |  |
| 2. Name of Operator   |                     |                 |                                       | 8. Well No. 1           |                      |          |  |  |
| Southwestern Energy Production Co   | 0 D 1               | Wildoot         |                                       |                         |                      |          |  |  |
| 3 Address of Operator   |                     |                 |                                       | 8. Pool name or Wildcat |                      |          |  |  |
| 2350 N. Sam Houston Parkway Eas   | Wilson Morrow (Gas) |                 |                                       |                         |                      |          |  |  |
| 4. Well Location  |                     |                 |                                       |                         |                      |          |  |  |
|   |                     |                 |                                       |                         |                      |          |  |  |
| Unit Letter <u>A</u> : <u>660</u> feet from the <u>N</u> line and <u>660</u> feet from the <u>E</u> line                      |                     |                 |                                       |                         |                      |          |  |  |
|   |                     |                 | 245                                   | NMPM Lea                | County               |          |  |  |
| Section 14  | Township            | 21S Ran         |                                       |                         | county               |          |  |  |
| 10. Elevation (Show whether DR, RKB, RT, GR, etc.)  |                     |                 |                                       |                         |                      |          |  |  |
|   | 3,669 GR            | NT              | CNT-4                                 | Deport or Other         | Data                 |          |  |  |
| 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data<br>NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: |                     |                 |                                       |                         |                      |          |  |  |
| NOTICE OF IN  |                     | ALTERING CASING |                                       |                         |                      |          |  |  |
| PERFORM REMEDIAL WORK   | PLUG AND ABANDO     | N 🔲             | REMEDIAL WOR                          |                         | ALTERING CASING      |          |  |  |
|   |                     | _               |                                       | RILLING OPNS.           | PLUG AND             | _        |  |  |
| TEMPORARILY ABANDON   | CHANGE PLANS        |                 | COMMENCE DF                           |                         | ABANDONMENT          |          |  |  |
|   | MULTIPLE            |                 | CASING TEST A                         | ND X                    |                      |          |  |  |
| PULL OR ALTER CASING  | COMPLETION          |                 | CEMENT JOB                            |                         |                      |          |  |  |
|   |                     |                 |                                       |                         |                      | <b>—</b> |  |  |
| OTHER:  |                     |                 | OTHER:                                |                         |                      |          |  |  |
| OTHER.  |                     |                 | · · · · · · · · · · · · · · · · · · · | the strengt datag       | including estimated  | date     |  |  |

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.

7/7/00 thru 7/20/00

3

Drill to 12,900'. TD @ 2:00 pm on 7/11/00. Log. Run 34 jts, 4 ½' 13.5#, P-110, LT&C casing liner. Cmt w/190 sx Class "H" w/ 0.6% Gas migrant, 0.4% dispersant, 0.6% FL, and 2% KCL. Circ. cmt. WOC. TOL @ 11,482'. BOL @ 12,898'. TOC @ 11,540'. Tst liner. OK. Release rig @ 3:00 pm on 7/20/00. WOCU.

|  | the base of my knowledge and belief             |                            |  |  |  |  |  |
|--|---|----------------------------|--|--|--|--|--|
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. |   |                            |  |  |  |  |  |
| SIGNATURE Cathy Color  | TITLE Drilling Technician                       | DATE 7/21/00               |  |  |  |  |  |
| Type or print name Cathe Rowan   |   | Telephone No. 281-618-4733 |  |  |  |  |  |
| Type of print hame Caby Rowan  |   |                            |  |  |  |  |  |
| (This space for State use)   |   | aue 201                    |  |  |  |  |  |
|  | TITLE   | DATE                       |  |  |  |  |  |
| APPPROVED BY<br>Conditions of approval, if any:  | 「「「「「「「」」」」「「「」」」「「」」「「」」「「」」「「」」「」」「「」」」「」」「」」 |                            |  |  |  |  |  |

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