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CONDITIONS OF APPROVAL, IP ANY:

State of New Mexico

Form C-103

to Appropriate District Office Energy, M. ...rals and Natural Resources Department Revised 1-1-89 DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-10374 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE X FEE DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. B = 934SUNDRY 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.) NEW MEXICO "M" STATE 1. Type of Well: WATER INJECTION WELL OTHER 2. Name of Operator 8. Well No. GP II ENERGY, INC. 37 3. Address of Operator 9. Pool name or Wildcat PO BOX 50682 79710 MIDLAND, TEXAS LANGLIE MATTIX 4. Well Location 330 _ Feet From The _ South Line and ___330 West Feet From The ___ Line Range 37-E 20 22-S LEA Section Township **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3399' DF Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: X 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 CEMENT JOB 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. GP II PLANS TO START PLUGGING PROCEDURES ON THIW WELL IN APPROX. 60 DAYS. 1 _ MOVE INAAND RIG UP (100' above perfs @ 3602' - 3655') SET CIBP @ 3502' 2. PERFORATE 2-7/8" TUBING @ 2440' AND SET 25 sxs CEMENT PLUG - TAG 3. PERFORATE 2-7/8" TUBING @ 1100' AND SET 25 SXS CEMENT PLUG-TAG 4. SET PLUG AT 355' - 255' AND TAG (Surface Casing @ 305') 5. SET 60' PLUG AT SURFACE 6. CLEAN LOCATION AND MOVE OFF. I hereby certify that the information above is true and complete to the best of my knowledge and belief. DATE 03-28-2001 Production Analyst SIGNATURE TELEPHONE NO. 915-684-4748 TONYA GARZA TYPE OR PRINT NAME (This space for State Use)

THE COMPRESSION MUST BE NOTHING 2

HOURS PRIOR TO THE RECEIVENING OF

MUGGING OFFICIATIONS FOR THE EXPL

TO BE APPROVED.