

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.
30-025-24254-00-00
5. Indicate Type of Lease
STATE ☒ FEE ☐
6. State Oil & Gas Lease No.

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
PROPOSALS.)

1. Type of Well:
Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator
GP II Energy, Inc

3. Address of Operator
PO Box 50682 - Midland, Texas 79710

4. Well Location

Unit Letter K : 2540 feet from the North line and 1280 feet from the East line

Section 29 Township 22S Range 37E NMPM Lea County

7. Lease Name or Unit Agreement Name:
New Mexico M State

8. Well No.
065

9. Pool name or Wildcat
Langle Mattix

10. Elevation (Show whether DR, RKB, RT, GR, etc)

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Violation Correction ☒

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.

5/10/02

MIRU, Released on/off tool, POH with tubing. Tested tubing back in hole, all OK. Retrieve packer, POH, rubbers bad on packer. RIH w/redressed packer, circulate packer fluid. Test Backside to 300 psi for 15 minutes. Charted and witnessed by Gary Wink - NMOCD.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Shawn Brown TITLE Agent DATE 07/15/02

Type or print name Shawn Brown Telephone No. 915 684-4748

(This space for State use) ORIGINAL SIGNED BY

APPROVED BY GARY W. WINK TITLE QC FIELD REPRESENTATIVE / STAFF MANAGER
Conditions of approval, if any:

MAR 24 2003