

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-28215
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name STATE "A" A/C 1
Well No. 120
Pool name or Wildcat LANGLIE MATTIX-SR-QU-GB
Well Location Unit Letter <u>C</u> : <u>25</u> Feet From The <u>NORTH</u> Line and <u>1345</u> Feet From The <u>WEST</u> Line Section <u>10</u> Township <u>23S</u> Range <u>36E</u> NMPM <u>LEA</u> County
Elevation (Show whether DF, RKB, RT, GR, etc.) 3483 GR

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.)

Type of Well:
OIL WELL ☐ GAS WELL ☐ OTHER INJECTION

Name of Operator
CLAYTON W. WILLIAMS, JR., INC.

Address of Operator
SIX DESTA DRIVE, SUITE 3000, MIDLAND, TEXAS 79705

Well Location
Unit Letter C : 25 Feet From The NORTH Line and 1345 Feet From The WEST Line
Section 10 Township 23S Range 36E NMPM LEA County

Elevation (Show whether DF, RKB, RT, GR, etc.)
3483 GR

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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: TEMPORARILY ABANDON ☒

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.

TESTED 2-4-98 FOR 30 MINUTES TO 530#. CHART ATTACHED.

NO PRESSURE LOSS IN THE 30 MINUTE PERIOD.

TEMPORARILY ABANDONED WELL FOR FUTURE USE.

Permit Expires 1 Year From Approval
3-18-2003

Permit Expires 1 Year From Approval

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

SIGNATURE David G. Grafe TITLE PRODUCTION MANAGER DATE 03-10-98

TYPE OR PRINT NAME DAVID G. GRAFE TELEPHONE NO. 915-682-6324

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

APPROVED BY Chris Williams TITLE DISTRICT I SUPERVISOR DATE MAR 18 1998

CONDITIONS OF APPROVAL, IF ANY: