

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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, 87505

WELL API NO.	30-025-33824
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Lease Name or Unit Agreement Name Brunson-Argo
2. Name of Operator Titan Resources I, Inc.	8. Well No. 21
3. Address of Operator 500 W. Texas, Suite 500, Midland, Texas 79701	9. Pool name or Wildcat Wantz Abo
4. Well Location Unit Letter <u>F</u> : <u>1700</u> Feet From The <u>North</u> Line and <u>1880</u> Feet From The <u>West</u> Line Section <u>10</u> Township <u>22S</u> Range <u>37E</u> NMPM Lea County	

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3406' GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <u>TD</u> <input checked="" type="checkbox"/>	

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.

4/20/97 TD 7351'.

4/21/97 Ran 179 jts 5  $1\frac{1}{2}$ ", 17 lb/ft, K-55, LT&C casing. Set at 7351'. DV tool at 3993'.

4/22/97 Cemented 1 st stage with 800 sx 50:50 POZ. Opened DV tool. Did not circulate cement to surface. Cemented 2nd stage with 1165 sx 35:65 B J Lite + 100 sx Class "C" with 2% CaCl<sub>2</sub>. Circulated 63 sx to surface.

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

SIGNATURE Ron Lechwar TITLE Project Manager DATE 5/8/97  
TYPE OR PRINT NAME Ron Lechwar TELEPHONE NO. (915)682-6612

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY ELLISON TITLE ----- DATE -----  
CONDITIONS OF APPROVAL, IF ANY: -----

MAY 14 1997