

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

WELL API NO. 30-025-10744
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. E-4958
7. Lease Name or Unit Agreement Name: KELLY STATE
8. Well No. 2
9. Pool name or Wildcat LANGLIE MATTIX
10. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 T-K OPERATING
3. Address of Operator P.O. BOX 1500 HOBBS, NM 88241
4. Well Location Unit Letter <u>L</u> <u>660</u> feet from the <u>W</u> line and <u>1980</u> feet from the <u>S</u> line Section <u>16</u> Township <u>23S</u> Range <u>37E</u> NMPM County <u>LEA</u>
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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPLETION ☐	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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

START DATE: PRIOR TO 1-15-01
PULL ROD PUMP, PULL AND TEST TUBING RUN PUMP
ASSEMBLY. PUT PRODUCTION.

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

SIGNATURE Harry Teague TITLE Partner DATE 10-13-99
Type or print name Harry Teague OFFICIAL SIGNED BY OLIVER WILLIAMS Telephone No. 244-1392
(This space for State use) DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE 10-13-2000
Conditions of approval, if any:

