

District I

1625 N. French Dr., Hobbs, NM 88240

District II

811 South First, Artesia, NM 87210

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

<p>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.)</p>		<p>WELL API NO. 30-025-10823</p>
<p>1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other</p>		<p>5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/></p>
<p>2. Name of Operator TK OPERATING (A JOINT VENTURE)</p>		<p>6. State Oil & Gas Lease No.</p>
<p>3. Address of Operator C/O OIL REPORTS & GAS SERVICES, INC. 1008 W. BROADWAY, HOBBS, NM 88240</p>		<p>7. Lease Name or Unit Agreement Name: MAY "A"</p>
<p>4. Well Location Unit Letter <u>B</u> : <u>660</u> feet from the <u>NORTH</u> line and <u>1980</u> feet from the <u>EAST</u> line Section <u>21</u> Township <u>23S</u> Range <u>37E</u> NMPM LEA County</p>		<p>8. Well No. 1</p>
<p>10. Elevation (Show whether DR, RKB, RT, GR, etc.)</p>		<p>9. Pool name or Wildcat LANGLIE MATTIX SR-QU-GB</p>

<p>11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data</p>			
<p>NOTICE OF INTENTION TO:</p>		<p>SUBSEQUENT REPORT OF:</p>	
<p>PERFORM REMEDIAL WORK <input checked="" type="checkbox"/></p>	<p>PLUG AND ABANDON <input type="checkbox"/></p>	<p>REMEDIAL WORK <input checked="" type="checkbox"/></p>	<p>ALTERING CASING <input type="checkbox"/></p>
<p>TEMPORARILY ABANDON <input type="checkbox"/></p>	<p>CHANGE PLANS <input type="checkbox"/></p>	<p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p>	<p>PLUG AND ABANDONMENT <input type="checkbox"/></p>
<p>PULL OR ALTER CASING <input type="checkbox"/></p>	<p>MULTIPLE COMPLETION <input type="checkbox"/></p>	<p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p>	<p>OTHER: <input type="checkbox"/></p>

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.

12/3/00 LAID FLOWLINE AND OPENED WELL UP. WELL PRODUCING 3 MCF PER MONTH.

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

SIGNATURE Gaye Heard TITLE AGENT DATE 2/5/01

Type or print name GAYE HEARD

(This space for State use)

Telephone No. 505/393-2727

APPROVED BY _____ TITLE _____ DATE 1/26/01

Conditions of approval, if any: