Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, nerals and Natural Resources Department

Form C-103 Revised 1-1-89

OIL CONSERVATION DIVISION —

LL API NO.		 -
30-025-1	2415	

P.O. Box 1980, Hobbs, NM 88240 2040 Pacheco St.	WELL API NO.		
DISTRICT II Santa Fe, NM 87505 P.O. Drawer DD, Artesia, NM 88210	30-025-12415 5. Indicate Type of Lanse STATE FEE		
DISTRICT III 1000 Rio Brazos Rd., Azisc, NM 87410	6. State Oil & Gas Lease No.		
	NMNM0349956		
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.)	7. Lease Name or Unit Agreement Name		
1. Type of Well: Oil GAS WELL OTHER Salt water disposal	C.E. Penny Fed. NCT-4		
2. Name of Operator CENTRAL RESOURCES, INC.	8. Well No.		
3. Address of Operator	9. Pool name or Wildcat		
550 West Texas, Suite 430, Midland, TX 79701	LANGLIE MATTIX		
Unit Letter F: 1980 Feet From The NORTH Line and 165	O Feet From The WEST Line		
Section 19 Township 25S Range 38E	NMPM LEA County		
10. Elevation (Show whather DF, 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 DRILLIN	G OPNS. PLUG AND ABANDONMENT		
PULL OR ALTER CASING CASING TEST AND C	EMENT JOB		
OTHER: Set cast iron bridge plug OTHER:	[
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, incl. work) SEE RULE 1103.	uding estimated date of starting any proposed		
 Move in service rig Pull out of hole with AD-l packer and tubing Set cast iron bridge plug at 3205.21' Cap with 35' of cement Test casing to 500 psi for 30 mins Notify Gary Wink with OCD at 505-393-6161, 48 hrs 	prior to commencement of work.		
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SKINATURE Tricia Barnes Engineeri TYPE OR PRINT NAME Tricia Barnes 915-570-9	DATE		
(This space for State Use)	UN 18 197		
APPROVED BY TITLE			

APPROVED BY -