State of New Mexico Form C-103 Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 1625 N. French Day, Hobbs, NM 87240 30-025-23082 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III STATE FEE X 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 685270 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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.) Skelly Penrose 'A' Unit 1. Type of Well: Gas Well 🔲 Oil Well Other Injection Well 8. Well No. 2. Name of Operator Prize Operating Company 9. Pool name or Wildcat 3. Address of Operator Langlie Mattix 7-Rv Queen 3500 William D. Tate, Suite 200, Grapevine, Texas 76051 4. Well Location 1870 1900 North line and feet from the Unit Letter \_ feet from the \_ line **NMPM** County Township 23S Range Section Lea 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3325' GR 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 COMMENCE DRILLING OPNS. **PLUG AND TEMPORARILY ABANDON CHANGE PLANS ABANDONMENT MULTIPLE** CASING TEST AND **PULL OR ALTER CASING CEMENT JOB** COMPLETION X OTHER: OTHER: Temporary Abandonment 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. RU and RIH and pulled tubing and packer. PU and RIH w/CIBP and set at 3456' and test casing to 510 psi. Held OK. Left well TA'd. This Approval of Temporary Abandonment Expires I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Regulatory Analyst SIGNATURE. DATE\_

CRIGINAL SIGNED BY

TITLE COLUMNIC BATATION BACKET SALES CONTRACTOR

GARY W. WINK

Telephone No.

DATAR 1

5

Type or print name Don Aldridge

(This space for State use)

Conditions of approval, if any:

APPROVED BY\_