

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
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. 30-025-34729
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B - 1484
7. Lease Name or Unit Agreement Name Cooper State
8. Well No. 3
9. Pool name or Wildcat Jalmat - Tansil-Yates-Seven Rivers

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator Gruy Petroleum Management Co.	
3. Address of Operator P. O. Box 140907, Irving, Texas 75014-0907	
4. Well Location Unit Letter <u>L</u> : <u>1686</u> Feet From The <u>S</u> Line and <u>660</u> Feet From The <u>W</u> Line Section <u>2</u> Township <u>24S</u> Range <u>36E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3367' 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
	OTHER: <input 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.

Spud well 11-9-99

11-10-99 Ran 18 joints 8 5/8" 24# J-55 @ 750'. Lead w/350 sks Premium Plus 2% CC 1/4# Flocele & 4% gel.

Tail w/200 sks Premium Plus 2% CC 1/43 Flocele. Circulated 97 sks to pit.

11-18-99 Ran 89 joints 5 1/2" 15.5# @ 3830'. Lead w 350 sks Premium Plus Circ 85 sks to pit. Tail w/600 sks Interfill

Circ 162 sks to pit.

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

SIGNATURE Zeno Farris TITLE Manager Operations Administration DATE 01-14-99

TYPE OR PRINT NAME Zeno Farris TELEPHONE NO. (972) 401-3111

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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