

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  
1220 S. St. Francis Dr., Santa Fe, NM 87504

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87504

Form C-103  
Revised March 25, 1999

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 Water Injection	WELL API NO. 30-025-11311
2. Name of Operator KENSON OPERATING COMPANY, INC.	5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator P O BOX 3531, MIDLAND TX 79702	6. State Oil & Gas Lease No. B 148-18
4. Well Location Unit Letter <u>D</u> : <u>990</u> feet from the <u>north</u> line and <u>660</u> feet from the <u>west</u> line Section <u>32</u> Township <u>24S</u> Range <u>37E</u> NMPM LEA County NM	7. Lease Name or Unit Agreement Name: LANGLIE JAL UNIT
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3252' GR	8. Well No. 3
9. Pool name or Wildcat LANGLIE MATTIX (SRQ)	

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

MI & RU January 2002 . . . TOH with any downhole equipment.  
Set CIBP over existing perforations. Pressure test casing.  
Circulate hole with noncorrosive fluid.  
Temporarily Abandon well.

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

SIGNATURE L. A. Sirgo TITLE Engineer DATE 10-26-01

Type or print name M. A. Sirgo, III

(This space for State use)

Telephone No. 915/685.0878

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
Conditions of approval, if any:

APPROVED BY  
PAUL F. KAUTZ  
PETROLEUM ENGINEER

DATE OCT 29 2001