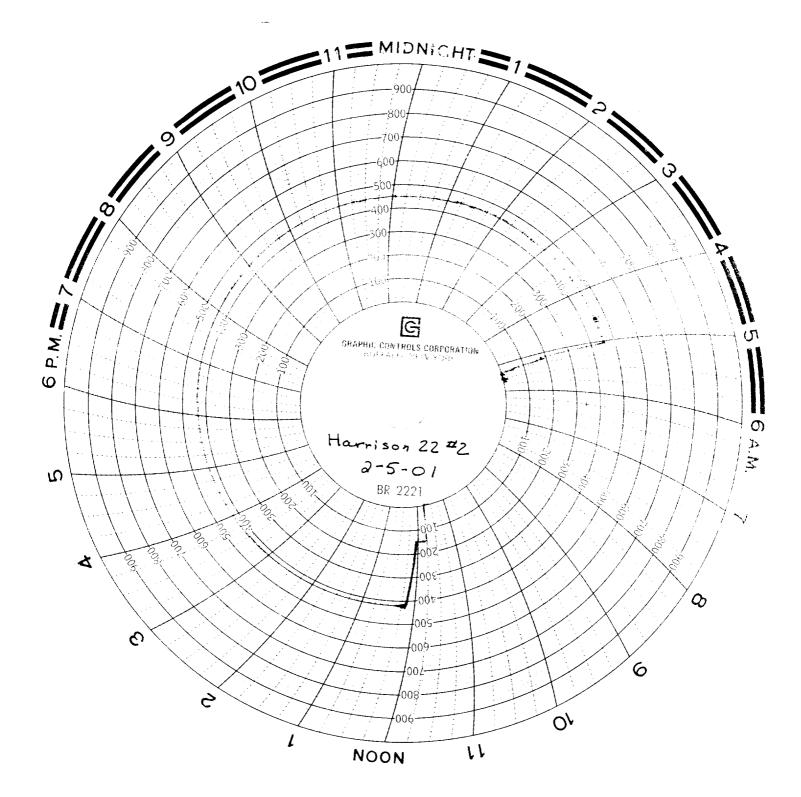
Submit 3 Copies To Appropriate District Office State of New Mer	rina
District I Francis Minagel and No.	Form C-103
1625 N. French Dr., Hobbs, NM 87240 District II Revised March 25, 1999 WELL API NO.	
811 South First, Artesia, NM 87210 OIL CONSERVATION	DIVISION 30-025-11690
District III 1000 Rio Brazos Rd., Aztec, NM 87410 2040 South Pach	5. Indicate Type of Lease
District IV Santa Fe NIM 97	STATE XX FEE
2040 South Pacheco, Santa Fe, NM 87505 6. State Oil & Gas Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS	NMLC032579A
	7. Lease Name or Unit Agreement Name:
PROPOSALS.)	
1. Type of Well:	
Oil Well Gas Well Other injector (pe	ending) Harrison
Permian Resources, Inc.	8. Well No.
3. Address of Operator	22-2
D O Bos 500 20133	9. Pool name or Wildcat
4. Well Location	Langlie Mattix
·	
Unit Letter I : 2310 feet from the South line and 990 feet from the East line	
	line line
TOWNSHIP ZOO RANGE 3/F. NIMPM I OO	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3066 GR	
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	ure of Notice, Report or Other Data
PERFURM REMEDIAL MODIL CO. Butto	SUBSEQUENT REPORT OF:
***	REMEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND
PULL OR ALTER CASING	ARANDONAENT
COMM	CASING TEST AND CEMENT JOB
OTHER.	
12. Describe proposed or completed operations. (Clearly state all parties of the Prep for SWD conversion	
12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date or recompilation. SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion	
or recompilation.	
CIT on 02-05-01	
Start psi @ 460# End psi @ 430#	
SWD conversion pending availability of equipment and personnel	
1 41-Provide and Personner	
I hereby certify that the information above is an and	***
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE GALLE VIANNICE TITLE GE	ologist DATE 02-16-01
	DATE 02 10-01
Type or print name Dave Evasnicka (This space for State use)	Telephone No.915/685-0113
APPPROVED BY TITLE	
Conditions of approval, if any:	DATE

5 C S

51110-793



9 A.