Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO. 30-025-20352

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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: Knight

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER Inj.

2. Name of Operator: Smith & Marrs Inc.

8. Well No. 9

3. Address of Operator: P. O. Box 863 Kermit, TX. 79745

9. Pool name or Wildcat: Langlie Mattix 7RVS/Queen

4. Well Location
Unit Letter L : 2635 Feet From The South Line and 315 Feet From The West Line

Section 22 Township 24S Range 37E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3247 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	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER:	☐			OTHER:			☐

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.

1. 20 SKS @ 3300-3200' & TAG
2. 20 SKS @ 2200-2100 — 7" SHOE PLUG F/1222-1122' TAG
3. Pull 4½ @ 800'
4. 45 SKS @ 850-730' & tag — 10 3/4" SHOE PLUG F/235'-135' TAG
5. 155 SKS @ 60-0 surface

8 5/8 - 781-420 SKS
4½ - 3379-75 SKS
Open-Hole 3379-3650

Hobbs OCD

THE COMMISSION MUST BE NOTIFIED HOURS PRIOR TO THE BEGINNING PLUGGING OPERATIONS FOR THE C-1 TO BE APPROVED.

Install Dry Hole Marker. Cir 9.5# MUD

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

SIGNATURE [signature] TITLE Pres. DATE 11-15-01

TYPE OR PRINT NAME Ricky Smith TELEPHONE NO. 915 586-307

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE NOV 20 2001

CONDITIONS OF APPROVAL, IF ANY: