

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

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

WELL API NO.	30-025-20354
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.	8. Well No.		7
2. Name of Operator Smith & Mairs Inc.	9. Pool name or Wildcat		Langlie Mattix TRUS/Queen
3. Address of Operator P.O. Box 863 Kermit, TX. 79745			
4. Well Location Unit Letter I : 1315 Feet From The EAST Line and 2635 Feet From The South Lin			
Section 21 Township 24S Range 37E NMPM LEA County	10. Elevation (Show whether DF, RKB, RT, GR, etc.)		

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

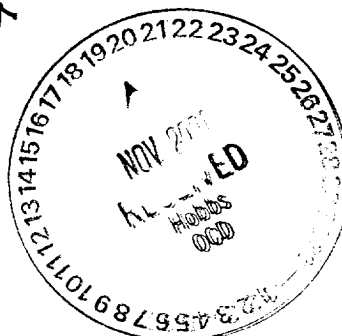
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
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.

- 20 SKS @ 3200-3300' & tag
- Pull 4 1/2 CASING
- 35 SKS @ 50' & 50' out stub TAG
- 45 SKS @ 867-767' - TAG
- 15 SKS @ 60' - SURFACE

NEED SALT PLUG F/1200'-1100'
858-817-4255X
4 1/2 - 3363-1005X
TD 3363-3620



THE COMMISSION MUST BE NOTIFIED 24
HOURS PRIOR TO THE BEGINNING OF
PLUGGING OPERATIONS FOR THE C-103
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 Ricky Smith TITLE Pres DATE 11-15-01
TYPE OR PRINT NAME Ricky Smith TELEPHONE NO. 586-3076

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE NOV 30 2001
CONDITIONS OF APPROVAL, IF ANY: _____