

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. 30-025-23769
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name LANGLIE MATTIX QUEEN UNIT
8. Well No. 39
9. Pool name or Wildcat LANGLIE MATTIX 7RVRS-Q-GB
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3094' GR

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 type="checkbox"/> OTHER WATER INJECTION WELL <input checked="" type="checkbox"/>
2. Name of Operator PRIZE OPERATING COMPANY
3. Address of Operator 3500 WILLIAM D. TATE, SUITE 200, GRAPEVINE, TX 76051
4. Well Location Unit Letter P : 215 Feet From The EAST Line and 900 Feet From The SOUTH Line Section 15 Township 25S Range 37E NMPM LEA County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>
OTHER: <input type="checkbox"/>
SUBSEQUENT REPORT OF:
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.

PRIZE OPERATING CO. REQUESTS APPROVAL TO PLUG AND ABANDON THE WELL PER OCD SPECIFICATIONS AS PER ATTACHED DIAGRAM AND PROCEDURE. THE WELL WOULD NOT PASS THE REQUIRED MECHANICAL INTEGRITY TEST. IF YOU HAVE ANY QUESTIONS PLEASE CONTACT DAVID EYLER @ 915.687.3033.

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

SIGNATURE David A. Eyler TITLE AGENT DATE 05/17/01

TYPE OR PRINT NAME DAVID A. EYLER TELEPHONE NO. 915.687.3033

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

7c

dp