

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

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.)		WELL API NO. 30-025-27841
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator KENSON OPERATING COMPANY, INC.		6. State Oil & Gas Lease No. B-1506
3. Address of Operator P O BOX 3531, MIDLAND TX 79702		7. Lease Name or Unit Agreement Name: LANGLIE JAL UNIT
4. Well Location Unit Letter <u>M N</u> : <u>140</u> feet from the <u>south</u> line and <u>2600</u> feet from the <u>west</u> line Section <u>32</u> Township <u>24S</u> Range <u>37E</u> NMPM LEA County <u>NM</u>		8. Well No. 96
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3245' GR		9. Pool name or Wildcat LANGLIE MATTIX (SRQ)

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: REACTIVATE <input checked="" 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 March 2002. TOH with downhole equipment.
Repair if necessary.
Restore well to *rich*

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

SIGNATURE M. A. Sirgo III TITLE ENGINEER DATE 10-26-01

Type or print name M. A. SIRGO, III
(This space for State use)

Telephone No 15/685.0878

APPROVED BY _____ TITLE _____ DATE 10/26/2001
Conditions of approval, if any:

ORIGINAL SIGNED BY
PAUL F. KAUTZ
PETROLEUM ENGINEER