

Submit 3 Copies To Appropriate District  
Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

'000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103

Revised March 25, 1999

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)</p>		<p>WELL API NO. 30-025-33533</p>
<p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p>		<p>5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/></p>
<p>2. Name of Operator E.G.L. Resources Inc.</p>		<p>6. State Oil &amp; Gas Lease No.</p>
<p>3. Address of Operator P. O. Box 10886, Midland, TX 79702</p>		<p>7. Lease Name or Unit Agreement Name: United Royalty "A"</p>
<p>4. Well Location Unit Letter <u>F</u> : <u>1980</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>19</u> Township <u>24S</u> Range <u>38E</u> NMPM <u>Lea</u> County</p>		<p>8. Well No. 5</p>
<p>10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3183' GL</p>		<p>9. Pool name or Wildcat Dollarhide Queen</p>

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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

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

OTHER: Plugback from Fusselman ☒

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.

4/8/02: MI & RU JSI Wireline & mast truck. RIH w/5 1/2" CIBP w/ Gamma Gun. Correl w/Schlumberger Platform Express, CNL, Litho-Density, NGT log dtd 11/9/96. Set CIBP @ 8174'. RIH w/dump bailer & dump 35' cement on top. POOH. RIH w/4" csg gun w/19 gram charges & 90 degree phasing. Perf Queen zones w/2 jspfs: 3719-3767' 29' & 58 holes. 2 runs-all shots fired. RD & MO WL. RIH w/5 1/2" treating pkr & SN on 121 jts 2 7/8" tbg. Left pkr swinging @ 3616', SWIFN.  
4/9/02: RIH w/3 stds 2 3/8" tbg, set pkr @ 3803'. Load hole w/ 3.6 bbls 2% KCL wtr, pressure test CIBP @ 8174'-5 1/2" csg good to 1000 psi. LD 1 jt 2 3/8" tbg, pkr swinging @ 3771'. Circ well w/67 bbls 2% KCL water & spot 250 gals 15% HCl Acid+3 ppt A-179 Iron Control Aid + 1 gpt A-264 corrosion inhibitor+1 gpt L55 Clay Stabilizer+5 gpt L-63 Iron Agent+2 gpt W-54 Non-Emulsifier, displaced w/13.5 bbls 2% KCL water. Release pkr, LD 5 jts 2 3/8" tbg. Pump 5 bbls 2% KCL wtr downn annulus. Set pkr @ 3618' Acidize perms w/1500 gals above acid, Flush w/17.5 bbls 2% KCL.  
4/10/02: Frac perms w/188 bbls YF125 XL gel, 272,400 scf N2 (70 qual) & 33630 # 16/30 Brady sd.  
4/11/02: Swab perms via 2 3/8" tbg. Made 29 runs, well gassing during & after each swab run. Set TAC @ 3676. (see Page 2)

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

SIGNATURE Linda Johnston TITLE Agent DATE 5/2/02

Type or print name Linda Johnston

(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE MAY 13 2002

Conditions of approval, if any:

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4. Well Location  Unit Letter <b>F</b> : <b>1980</b> feet from the <b>North</b> line and <b>1980</b> feet from the <b>West</b> line  Section <b>19</b> Township <b>24S</b> Range <b>38E</b> NMPM <b>Lea</b> County		8. Well No. <b>5</b>
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. Pool name or Wildcat <b>Dollarhide Queen</b>

**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: <input type="checkbox"/>		OTHER: <b>Plugback from Fusselman</b> <input checked="" type="checkbox"/>	

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4/12/02: Well did not flow overnight. PU & RIH w/new 2"x1½"x16' pump w/1½"x12' gas anchor, 1 2"x3/4" pony rod, 100 3/4" new grade "D" rods, 48 7/8" grade "1" inspected "D" Rods, 1-6' & 1-4' 6.7" pony rods, 1¼"x20' PR w/12' PRL. Bridle too long. Clean location, RD & MO PU. Wait on pump unit service crew. C/O bridle, check balance on pump jack. Check pump action.

4/13/02: Well pumping

4/14/02: Well not pumping-gas lock-open csg, bleed off gas and leave open. Well pumping good.

4/15/02: Well pumping tested 35 bo/92 bw over 24 hr. period at 4/16/02.

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

SIGNATURE Linda Johnston TITLE Agent DATE 5/2/02

Type or print name Linda Johnston Telephone No. (915) 694-8228  
 (This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of approval, if any:

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