

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
1000 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

Form C-103
Revised March 25, 1999

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

WELL API NO. 30-015-21765
5. Indicate Type of Lease Federal STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM-0415688-A
7. Lease Name or Unit Agreement Name: Old Indian Draw Unit
8. Well No. 7
9. Pool name or Wildcat Indian Draw Delaware

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 ☒ Gas Well ☐ Other ☐

2. Name of Operator
Ricks Exploration, Inc

3. Address of Operator
210 Park Ave, STE 3000 Oklahoma City, OK 73102

4. Well Location

Unit Letter F : 2323 feet from the North line and 1974 feet from the West line

Section 18 Township 22S Range 28E NMPM Eddy County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
3077' GL

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 ☐

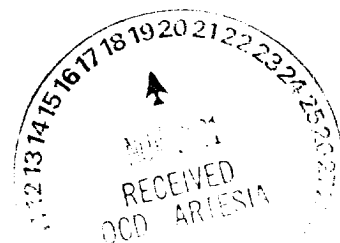
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

1. RU PU. ND wellhead. NU BOP. TOO H w/ tbg.
2. RU wireline. Set CIBP @ 3090'. Dump bail 35' cement on CIBP.
3. TIH w/ tbg to 3000'. Displace hole w/ packer fluid. ND BOP. NU Wellhead. Press test to 500#.
4. RD & MO PU.



* Notify OCD 24 hrs prior to pressure test

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

SIGNATURE Bryan Rother TITLE Engineer DATE 11/13/01

Type or print name Bryan Rother Telephone No. 405/516/1100

(This space for State use)

APPROVED BY Bryan Rother TITLE Compliance Officer DATE 11-26-01

Conditions of approval, if any: